

FISCAL YEAR 2026
TRULY AGREED AND FINALLY PASSED
(AFTER VETO)
DEPARTMENT OF SOCIAL SERVICES
DIVISION OF MO HEALTHNET
(Book 5 of 5)
HOUSE BILL 11

Vetoed: Section 11.630 – Closed-Loop Social Services Referral Program \$2,000,000 (out of \$4,000,000);
Section 11.755 – Air Ambulance Rate Increase \$441,815;
Section 11.770 – Air Ambulance Rate Increase \$132,272 &
Section 11.845 – Air Ambulance Rate Increase \$320,025

103rd General Assembly
First Regular Session

Prepared by Senate Appropriations Staff

DEPARTMENT OF SOCIAL SERVICES
Section 11.600 – MO HealthNet Division – Administration

Book 7, Page 1260

Description: The MO HealthNet Administration appropriation provides funding for the salaries and associated expense and equipment for the Central Office management and support staff. Funding from this appropriation is also used to support ongoing expense and equipment costs. MO HealthNet Division staff assist participants and providers.

Legal Base: State Statute: Section 208.201, RSMo.; Federal Law: Social Security Act Section 1902(a) (4); Federal Regulation: 42 CFR, Part 432

Funding Sources: General Revenue (1101), FMAP Enhancement-Expansion Fund (2466), Department of Social Services Federal Fund (1610), Pharmacy Rebates Fund (1114), Federal Reimbursement Allowance Fund (1142), Pharmacy Reimbursement Allowance Fund (1144), Health Initiatives Fund (1275), Nursing Facility Quality of Care Fund (1271), Third-Party Liability Collections Fund (1120), Life Sciences Research Fund (1763), MO Rx Plan Fund (1779), Ambulance Service Reimbursement Allowance Fund (1958), and Ground Emergency Medical Transportation Fund (1422)

FY 2025 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

Core reduction: (\$1,003,227) (GR \$501,614 and FED \$501,613 E&E) reduction of one-time funding

GOVERNOR:

Same as Department – no additional core changes

HOUSE:

Core reduction: (\$50,000) GR E&E reduction due to estimated lapse

SENATE:

Same as House – no additional core changes

CONFERENCE:

Same as House – no additional core changes

Dept Of Social Services														
	FY25 Budget Amount*	FY25 Budget FTE*	FY26 Department Request	FY26 Department Request FTE	FY26 Governor Recommended as Amended	FY26 Governor Recommended as Amended FTE	FY26 House Recommended	FY26 House Recommended FTE	FY26 Senate Recommended	FY26 Senate Recommended FTE	FY26 Truly Agreed Finally Passed	FY26 Truly Agreed Finally Passed FTE	FY26 TAFP After VETO Action	FY26 TAFP After VETO Action FTE
Section 11.600														
Mo Healthnet Admin - 830187B														
Core														
General Revenue	10,579,281	62.90	10,077,667	62.90	10,077,667	62.90	10,027,667	62.90	10,027,667	62.90	10,027,667	62.90	10,027,667	62.90
Personal Services	4,324,812	62.90	4,324,812	62.90	4,324,812	62.90	4,324,812	62.90	4,324,812	62.90	4,324,812	62.90	4,324,812	62.90
Expense & Equipment	6,254,469	0.00	5,752,855	0.00	5,752,855	0.00	5,702,855	0.00	5,702,855	0.00	5,702,855	0.00	5,702,855	0.00
Federal Funds	20,377,085	131.19	19,875,472	131.19	19,875,472	131.19	19,875,472	131.19	19,875,472	131.19	19,875,472	131.19	19,875,472	131.19
Personal Services	8,901,950	131.19	8,901,950	131.19	8,901,950	131.19	8,901,950	131.19	8,901,950	131.19	8,901,950	131.19	8,901,950	131.19
Expense & Equipment	11,475,135	0.00	10,973,522	0.00	10,973,522	0.00	10,973,522	0.00	10,973,522	0.00	10,973,522	0.00	10,973,522	0.00
Other Funds	3,745,228	45.61	3,745,228	45.61	3,745,228	45.61	3,745,228	45.61	3,745,228	45.61	3,745,228	45.61	3,745,228	45.61
Personal Services	2,360,066	45.61	2,360,066	45.61	2,360,066	45.61	2,360,066	45.61	2,360,066	45.61	2,360,066	45.61	2,360,066	45.61
Expense & Equipment	1,385,162	0.00	1,385,162	0.00	1,385,162	0.00	1,385,162	0.00	1,385,162	0.00	1,385,162	0.00	1,385,162	0.00
Total	\$34,701,594	239.70	\$33,698,367	239.70	\$33,698,367	239.70	\$33,648,367	239.70	\$33,648,367	239.70	\$33,648,367	239.70	\$33,648,367	239.70
Diagnosis Related Groups - NOP.83B.002														
General Revenue	0	0.00	500,000	0.00	500,000	0.00	500,000	0.00	500,000	0.00	500,000	0.00	500,000	0.00
Expense & Equipment	0	0.00	500,000	0.00	500,000	0.00	500,000	0.00	500,000	0.00	500,000	0.00	500,000	0.00
Federal Funds	0	0.00	500,000	0.00	500,000	0.00	500,000	0.00	500,000	0.00	500,000	0.00	500,000	0.00
Expense & Equipment	0	0.00	500,000	0.00	500,000	0.00	500,000	0.00	500,000	0.00	500,000	0.00	500,000	0.00
Total	\$0	0.00	\$1,000,000	0.00	\$1,000,000	0.00	\$1,000,000	0.00	\$1,000,000	0.00	\$1,000,000	0.00	\$1,000,000	0.00
Diagnostic Related Groups (DRGs) are used to group patients with similar clinical conditions and treatment needs. The DRG will take into account the patient's condition, the complexity of the procedure, and any complications that may affect the patient's care. DRG is used to reimburse hospitals for inpatient stays based on the patient's diagnosis and the care provided during the hospital stay. This means that hospitals are paid a fixed amount for each patient based on the DRG assigned to the patient. The MO HealthNet Division (MHD) will be transitioning to a DRG payment methodology July 1, 2025. This New Decision Item will help to closely monitor the outcomes of the transition and set up the path towards value based payment methodologies utilizing the DRG methodology as a base.														
Pay Plan - SWO.GV.002														
General Revenue	0	0.00	0	0.00	233,507	0.00	0	0.00	233,507	0.00	233,507	0.00	233,507	0.00
Personal Services	0	0.00	0	0.00	233,507	0.00	0	0.00	233,507	0.00	233,507	0.00	233,507	0.00
Federal Funds	0	0.00	0	0.00	558,584	0.00	0	0.00	558,584	0.00	558,584	0.00	558,584	0.00
Personal Services	0	0.00	0	0.00	558,584	0.00	0	0.00	558,584	0.00	558,584	0.00	558,584	0.00
Other Funds	0	0.00	0	0.00	98,624	0.00	0	0.00	98,624	0.00	98,624	0.00	98,624	0.00
Personal Services	0	0.00	0	0.00	98,624	0.00	0	0.00	98,624	0.00	98,624	0.00	98,624	0.00
Total	\$0	0.00	\$0	0.00	\$890,715	0.00	\$0	0.00	\$890,715	0.00	\$890,715	0.00	\$890,715	0.00
The FY 2026 budget includes appropriation authority for a time of service adjustment plan for full-time state employees. This would provide a 1% salary increase for every two years of continuous state service and would cap out at 10% for 20 years of service. This excludes job classes with statutorily-set salaries, the Departments of Transportation and Conservation, and certain job classes within the Missouri State Highway Patrol, who have existing time of service pay structures. State employees working in 24/7 facilities that already have this time of service pay plan will get a one percent cost of living adjustment.														
Mileage increase to 70 cents - SWO.HS.004														
General Revenue	0	0.00	0	0.00	0	0.00	246	0.00	246	0.00	246	0.00	246	0.00
Expense & Equipment	0	0.00	0	0.00	0	0.00	246	0.00	246	0.00	246	0.00	246	0.00
Federal Funds	0	0.00	0	0.00	0	0.00	208	0.00	208	0.00	208	0.00	208	0.00
Expense & Equipment	0	0.00	0	0.00	0	0.00	208	0.00	208	0.00	208	0.00	208	0.00

*Does not include Supplementals.

Dept Of Social Services														
	FY25 Budget Amount*	FY25 Budget FTE*	FY26 Department Request	FY26 Department Request FTE	FY26 Governor Recommended as Amended	FY26 Governor Recommended as Amended FTE	FY26 House Recommended	FY26 House Recommended FTE	FY26 Senate Recommended	FY26 Senate Recommended FTE	FY26 Truly Agreed Finally Passed	FY26 Truly Agreed Finally Passed FTE	FY26 TAFP After VETO Action	FY26 TAFP After VETO Action FTE
Total	\$0	0.00	\$0	0.00	\$0	0.00	\$454	0.00	\$454	0.00	\$454	0.00	\$454	0.00
Increase Mileage rate to match IRS rate of \$0.70 per mile														
House Pay Plan - SWO.HS.005														
General Revenue	0	0.00	0	0.00	0	0.00	148,820	0.00	0	0.00	0	0.00	0	0.00
Personal Services	0	0.00	0	0.00	0	0.00	148,820	0.00	0	0.00	0	0.00	0	0.00
Federal Funds	0	0.00	0	0.00	0	0.00	345,561	0.00	0	0.00	0	0.00	0	0.00
Personal Services	0	0.00	0	0.00	0	0.00	345,561	0.00	0	0.00	0	0.00	0	0.00
Other Funds	0	0.00	0	0.00	0	0.00	69,388	0.00	0	0.00	0	0.00	0	0.00
Personal Services	0	0.00	0	0.00	0	0.00	69,388	0.00	0	0.00	0	0.00	0	0.00
Total	\$0	0.00	\$0	0.00	\$0	0.00	\$563,769	0.00	\$0	0.00	\$0	0.00	\$0	0.00
PayPlan half percent vacancy - SWO.HS.010														
General Revenue	0	0.00	0	0.00	0	0.00	20,837	0.00	0	0.00	0	0.00	0	0.00
Personal Services	0	0.00	0	0.00	0	0.00	20,837	0.00	0	0.00	0	0.00	0	0.00
Federal Funds	0	0.00	0	0.00	0	0.00	42,674	0.00	0	0.00	0	0.00	0	0.00
Personal Services	0	0.00	0	0.00	0	0.00	42,674	0.00	0	0.00	0	0.00	0	0.00
Other Funds	0	0.00	0	0.00	0	0.00	11,438	0.00	0	0.00	0	0.00	0	0.00
Personal Services	0	0.00	0	0.00	0	0.00	11,438	0.00	0	0.00	0	0.00	0	0.00
Total	\$0	0.00	\$0	0.00	\$0	0.00	\$74,949	0.00	\$0	0.00	\$0	0.00	\$0	0.00
Total - Mo Healthnet Admin	\$34,701,594	239.70	\$34,698,367	239.70	\$35,589,082	239.70	\$35,287,539	239.70	\$35,539,536	239.70	\$35,539,536	239.70	\$35,539,536	239.70

*Does not include Supplementals.

DEPARTMENT OF SOCIAL SERVICES

Section 11.605 – MO HealthNet Division – Pharmacy Program (Clinical Services) Management

Book 7, Page 1270

Description: This section provides funding for the contractor costs that support the pharmacy and clinical services programs. Funding is used for cost containment initiatives and clinical policy decision-making to enhance efforts to provide appropriate and quality medical care to participants. The MO HealthNet Division (MHD) seeks to aid recipients and providers in their efforts to access the MO HealthNet program by utilizing contractor resources effectively.

Legal Base: State Statute: Section 208.201, RSMo.; Federal Law: Social Security Act Section 1902(a) (4).; Federal Regulation: 42 CFR, Part 432

Funding Sources: General Revenue (1101), Department of Social Services Federal Fund (1610), Third Party Liability Collections Fund (1120), MO Rx Plan Fund (1779), and Pharmacy Rebates Fund (1114)

FY 2025 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

No core changes

GOVERNOR:

No core changes

HOUSE:

No core changes

SENATE:

No core changes

CONFERENCE:

No core changes

Dept Of Social Services														
	FY25 Budget Amount*	FY25 Budget FTE*	FY26 Department Request	FY26 Department Request FTE	FY26 Governor Recommended as Amended	FY26 Governor Recommended as Amended FTE	FY26 House Recommended	FY26 House Recommended FTE	FY26 Senate Recommended	FY26 Senate Recommended FTE	FY26 Truly Agreed Finally Passed	FY26 Truly Agreed Finally Passed FTE	FY26 TAFP After VETO Action	FY26 TAFP After VETO Action FTE
Section 11.605														
Clinical Srvc Mgmt - 830188B														
Core														
General Revenue	461,917	0.00	461,917	0.00	461,917	0.00	461,917	0.00	461,917	0.00	461,917	0.00	461,917	0.00
Expense & Equipment	461,917	0.00	461,917	0.00	461,917	0.00	461,917	0.00	461,917	0.00	461,917	0.00	461,917	0.00
Federal Funds	12,214,032	0.00	12,214,032	0.00	12,214,032	0.00	12,214,032	0.00	12,214,032	0.00	12,214,032	0.00	12,214,032	0.00
Expense & Equipment	12,214,032	0.00	12,214,032	0.00	12,214,032	0.00	12,214,032	0.00	12,214,032	0.00	12,214,032	0.00	12,214,032	0.00
Other Funds	1,485,506	0.00	1,485,506	0.00	1,485,506	0.00	1,485,506	0.00	1,485,506	0.00	1,485,506	0.00	1,485,506	0.00
Expense & Equipment	1,485,506	0.00	1,485,506	0.00	1,485,506	0.00	1,485,506	0.00	1,485,506	0.00	1,485,506	0.00	1,485,506	0.00
Total	\$14,161,455	0.00	\$14,161,455	0.00	\$14,161,455	0.00	\$14,161,455	0.00	\$14,161,455	0.00	\$14,161,455	0.00	\$14,161,455	0.00
Total - Clinical Srvc Mgmt	\$14,161,455	0.00	\$14,161,455	0.00	\$14,161,455	0.00	\$14,161,455	0.00	\$14,161,455	0.00	\$14,161,455	0.00	\$14,161,455	0.00

*Does not include Supplementals.

DEPARTMENT OF SOCIAL SERVICES

Section 11.610 – MO HealthNet Division – MHD Transformation

Book 7, Page 1275

Description: The MHD Transformation program is a combination of initiatives the MO HealthNet Division (MHD) is in the process of implementing, with the goal of transforming Medicaid. Missouri's Medicaid program is an important safety net for Missouri's most vulnerable populations, providing health care and support for nearly one million Missourians. Analysis of historical trends indicates that the financial sustainability of Missouri's Medicaid program is currently under pressure. Significant changes in the structure and performance of Missouri's Medicaid program would be necessary to bring Medicaid spending growth in line with projected economic growth for the state. The initiatives are wide-ranging, including operational improvements to bring the program up to date with common practices among other state Medicaid programs, as well as best practices and more transformational changes.

Legal Base: HB 11

Funding Sources: General Revenue (1101) and Department of Social Services Federal Fund (1610)

FY 2025 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

No core changes

GOVERNOR:

No core changes

HOUSE:

No core changes

SENATE:

No core changes

CONFERENCE:

No core changes

Dept Of Social Services														
	FY25 Budget Amount*	FY25 Budget FTE*	FY26 Department Request	FY26 Department Request FTE	FY26 Governor Recommended as Amended	FY26 Governor Recommended as Amended FTE	FY26 House Recommended	FY26 House Recommended FTE	FY26 Senate Recommended	FY26 Senate Recommended FTE	FY26 Truly Agreed Finally Passed	FY26 Truly Agreed Finally Passed FTE	FY26 TAFP After VETO Action	FY26 TAFP After VETO Action FTE
Section 11.610														
Mhd Transformation - 830189B														
Core														
General Revenue	3,388,828	3.00	3,388,828	3.00	3,388,828	3.00	3,388,828	3.00	3,388,828	3.00	3,388,828	3.00	3,388,828	3.00
Personal Services	258,370	3.00	258,370	3.00	258,370	3.00	258,370	3.00	258,370	3.00	258,370	3.00	258,370	3.00
Expense & Equipment	3,130,458	0.00	3,130,458	0.00	3,130,458	0.00	3,130,458	0.00	3,130,458	0.00	3,130,458	0.00	3,130,458	0.00
Federal Funds	7,637,688	3.00	7,637,688	3.00	7,637,688	3.00	7,637,688	3.00	7,637,688	3.00	7,637,688	3.00	7,637,688	3.00
Personal Services	258,370	3.00	258,370	3.00	258,370	3.00	258,370	3.00	258,370	3.00	258,370	3.00	258,370	3.00
Expense & Equipment	7,379,318	0.00	7,379,318	0.00	7,379,318	0.00	7,379,318	0.00	7,379,318	0.00	7,379,318	0.00	7,379,318	0.00
Total	\$11,026,516	6.00	\$11,026,516	6.00	\$11,026,516	6.00	\$11,026,516	6.00	\$11,026,516	6.00	\$11,026,516	6.00	\$11,026,516	6.00
Medicare Enrollment Team - NOP.HS.049														
General Revenue	0	0.00	0	0.00	0	0.00	717,710	10.00	502,397	7.00	502,397	7.00	502,397	7.00
Personal Services	0	0.00	0	0.00	0	0.00	500,000	10.00	350,000	7.00	350,000	7.00	350,000	7.00
Expense & Equipment	0	0.00	0	0.00	0	0.00	217,710	0.00	152,397	0.00	152,397	0.00	152,397	0.00
Total	\$0	0.00	\$0	0.00	\$0	0.00	\$717,710	10.00	\$502,397	7.00	\$502,397	7.00	\$502,397	7.00
Pay Plan - SWO.GV.002														
General Revenue	0	0.00	0	0.00	13,844	0.00	0	0.00	13,844	0.00	13,844	0.00	13,844	0.00
Personal Services	0	0.00	0	0.00	13,844	0.00	0	0.00	13,844	0.00	13,844	0.00	13,844	0.00
Federal Funds	0	0.00	0	0.00	16,347	0.00	0	0.00	16,347	0.00	16,347	0.00	16,347	0.00
Personal Services	0	0.00	0	0.00	16,347	0.00	0	0.00	16,347	0.00	16,347	0.00	16,347	0.00
Total	\$0	0.00	\$0	0.00	\$30,191	0.00	\$0	0.00	\$30,191	0.00	\$30,191	0.00	\$30,191	0.00
The FY 2026 budget includes appropriation authority for a time of service adjustment plan for full-time state employees. This would provide a 1% salary increase for every two years of continuous state service and would cap out at 10% for 20 years of service. This excludes job classes with statutorily-set salaries, the Departments of Transportation and Conservation, and certain job classes within the Missouri State Highway Patrol, who have existing time of service pay structures. State employees working in 24/7 facilities that already have this time of service pay plan will get a one percent cost of living adjustment.														
Mileage increase to 70 cents - SWO.HS.004														
General Revenue	0	0.00	0	0.00	0	0.00	8	0.00	8	0.00	8	0.00	8	0.00
Expense & Equipment	0	0.00	0	0.00	0	0.00	8	0.00	8	0.00	8	0.00	8	0.00
Federal Funds	0	0.00	0	0.00	0	0.00	8	0.00	8	0.00	8	0.00	8	0.00
Expense & Equipment	0	0.00	0	0.00	0	0.00	8	0.00	8	0.00	8	0.00	8	0.00
Total	\$0	0.00	\$0	0.00	\$0	0.00	\$16	0.00	\$16	0.00	\$16	0.00	\$16	0.00
Increase Mileage rate to match IRS rate of \$0.70 per mile														
House Pay Plan - SWO.HS.005														
General Revenue	0	0.00	0	0.00	0	0.00	8,674	0.00	0	0.00	0	0.00	0	0.00
Personal Services	0	0.00	0	0.00	0	0.00	8,674	0.00	0	0.00	0	0.00	0	0.00
Federal Funds	0	0.00	0	0.00	0	0.00	10,601	0.00	0	0.00	0	0.00	0	0.00
Personal Services	0	0.00	0	0.00	0	0.00	10,601	0.00	0	0.00	0	0.00	0	0.00
Total	\$0	0.00	\$0	0.00	\$0	0.00	\$19,275	0.00	\$0	0.00	\$0	0.00	\$0	0.00

*Does not include Supplementals.

Dept Of Social Services														
	FY25 Budget Amount*	FY25 Budget FTE*	FY26 Department Request	FY26 Department Request FTE	FY26 Governor Recommended as Amended	FY26 Governor Recommended as Amended FTE	FY26 House Recommended	FY26 House Recommended FTE	FY26 Senate Recommended	FY26 Senate Recommended FTE	FY26 Truly Agreed Finally Passed	FY26 Truly Agreed Finally Passed FTE	FY26 TAFP After VETO Action	FY26 TAFP After VETO Action FTE
PayPlan half percent vacancy - SWO.HS.010														
General Revenue	0	0.00	0	0.00	0	0.00	1,244	0.00	0	0.00	0	0.00	0	0.00
Personal Services	0	0.00	0	0.00	0	0.00	1,244	0.00	0	0.00	0	0.00	0	0.00
Federal Funds	0	0.00	0	0.00	0	0.00	1,234	0.00	0	0.00	0	0.00	0	0.00
Personal Services	0	0.00	0	0.00	0	0.00	1,234	0.00	0	0.00	0	0.00	0	0.00
Total	\$0	0.00	\$0	0.00	\$0	0.00	\$2,478	0.00	\$0	0.00	\$0	0.00	\$0	0.00
Total - Mhd Transformation	\$11,026,516	6.00	\$11,026,516	6.00	\$11,056,707	6.00	\$11,765,995	16.00	\$11,559,120	13.00	\$11,559,120	13.00	\$11,559,120	13.00

*Does not include Supplementals.

DEPARTMENT OF SOCIAL SERVICES

Section 11.615 – MO HealthNet Division – Data Management Office

Book 7, Page 1280

Description: The Data Management Office (DMO) is funded to emphasize the importance of accurate and timely data and analytics to support programmatic decision-making. The DMO provides data analytics, routine reports, and dashboards for MHD, the Department of Social Services (DSS), sister agencies, the Centers for Medicare & Medicaid Services (CMS), and various other stakeholders. The DMO is responsible for several federal reports required by CMS, including the Transformed-Medicaid Statistical Information Systems (T-MSIS) reporting required to maintain federally enhanced funding for all the Missouri Medicaid Enterprise Solutions. The Data Governance program is also housed within the DMO.

Legal Base: HB 11

Funding Sources: General Revenue (1101) and Department of Social Services Federal Fund (1610)

FY 2025 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

Core reduction: (\$16,132) (GR \$5,390 and FED \$10,742 E&E) reduction of one-time funding

GOVERNOR:

Same as Department – no additional core changes

HOUSE:

Same as Department – no additional core changes

SENATE:

Same as Department – no additional core changes

CONFERENCE:

Same as Department – no additional core changes

Dept Of Social Services														
	FY25 Budget Amount*	FY25 Budget FTE*	FY26 Department Request	FY26 Department Request FTE	FY26 Governor Recommended as Amended	FY26 Governor Recommended as Amended FTE	FY26 House Recommended	FY26 House Recommended FTE	FY26 Senate Recommended	FY26 Senate Recommended FTE	FY26 Truly Agreed Finally Passed	FY26 Truly Agreed Finally Passed FTE	FY26 TAFP After VETO Action	FY26 TAFP After VETO Action FTE
Section 11.615														
Mhd Data Management Office - 830360B														
Core														
General Revenue	235,614	4.10	230,224	4.10	230,224	4.10	230,224	4.10	230,224	4.10	230,224	4.10	230,224	4.10
Personal Services	218,298	4.10	218,298	4.10	218,298	4.10	218,298	4.10	218,298	4.10	218,298	4.10	218,298	4.10
Expense & Equipment	17,316	0.00	11,926	0.00	11,926	0.00	11,926	0.00	11,926	0.00	11,926	0.00	11,926	0.00
Federal Funds	476,232	5.90	465,490	5.90	465,490	5.90	465,490	5.90	465,490	5.90	465,490	5.90	465,490	5.90
Personal Services	441,858	5.90	441,858	5.90	441,858	5.90	441,858	5.90	441,858	5.90	441,858	5.90	441,858	5.90
Expense & Equipment	34,374	0.00	23,632	0.00	23,632	0.00	23,632	0.00	23,632	0.00	23,632	0.00	23,632	0.00
Total	\$711,846	10.00	\$695,714	10.00	\$695,714	10.00	\$695,714	10.00	\$695,714	10.00	\$695,714	10.00	\$695,714	10.00
Pay Plan - SWO.GV.002														
General Revenue	0	0.00	0	0.00	7,096	0.00	0	0.00	7,096	0.00	7,096	0.00	7,096	0.00
Personal Services	0	0.00	0	0.00	7,096	0.00	0	0.00	7,096	0.00	7,096	0.00	7,096	0.00
Federal Funds	0	0.00	0	0.00	11,619	0.00	0	0.00	11,619	0.00	11,619	0.00	11,619	0.00
Personal Services	0	0.00	0	0.00	11,619	0.00	0	0.00	11,619	0.00	11,619	0.00	11,619	0.00
Total	\$0	0.00	\$0	0.00	\$18,715	0.00	\$0	0.00	\$18,715	0.00	\$18,715	0.00	\$18,715	0.00
The FY 2026 budget includes appropriation authority for a time of service adjustment plan for full-time state employees. This would provide a 1% salary increase for every two years of continuous state service and would cap out at 10% for 20 years of service. This excludes job classes with statutorily-set salaries, the Departments of Transportation and Conservation, and certain job classes within the Missouri State Highway Patrol, who have existing time of service pay structures. State employees working in 24/7 facilities that already have this time of service pay plan will get a one percent cost of living adjustment.														
House Pay Plan - SWO.HS.005														
General Revenue	0	0.00	0	0.00	0	0.00	3,112	0.00	0	0.00	0	0.00	0	0.00
Personal Services	0	0.00	0	0.00	0	0.00	3,112	0.00	0	0.00	0	0.00	0	0.00
Federal Funds	0	0.00	0	0.00	0	0.00	4,576	0.00	0	0.00	0	0.00	0	0.00
Personal Services	0	0.00	0	0.00	0	0.00	4,576	0.00	0	0.00	0	0.00	0	0.00
Total	\$0	0.00	\$0	0.00	\$0	0.00	\$7,688	0.00	\$0	0.00	\$0	0.00	\$0	0.00
PayPlan half percent vacancy - SWO.HS.010														
General Revenue	0	0.00	0	0.00	0	0.00	1,076	0.00	0	0.00	0	0.00	0	0.00
Personal Services	0	0.00	0	0.00	0	0.00	1,076	0.00	0	0.00	0	0.00	0	0.00
Federal Funds	0	0.00	0	0.00	0	0.00	2,185	0.00	0	0.00	0	0.00	0	0.00
Personal Services	0	0.00	0	0.00	0	0.00	2,185	0.00	0	0.00	0	0.00	0	0.00
Total	\$0	0.00	\$0	0.00	\$0	0.00	\$3,261	0.00	\$0	0.00	\$0	0.00	\$0	0.00
Total - Mhd Data Management Office	\$711,846	10.00	\$695,714	10.00	\$714,429	10.00	\$706,663	10.00	\$714,429	10.00	\$714,429	10.00	\$714,429	10.00

*Does not include Supplementals.

DEPARTMENT OF SOCIAL SERVICES

Section 11.620 – MO HealthNet Division – Third Party Liability (TPL) Contracts

Book 7, Page 1285

Description: This item funds contracted third party liability (TPL) recovery activities. TPL functions are performed by agency staff in the MO HealthNet Division TPL Unit and by a contractor. This core appropriation represents expense and equipment funding which is used to make payments to the contractor who works with the agency on TPL recovery activities.

Legal Base: State Statute: Sections 198.090, 208.101, 208.153, 208.166, 208.215, 473.398, and 473.399, RSMo.; State Regulation: 13 CSR 70-4.120 and 13 CSR 0-1.010.; Federal Law: Social Security Act, Section 1902, 1930, 1906, 1912, and 1917.; Federal Regulation: 42 CFR 433 Subpart D

Funding Sources: Department of Social Services Federal Fund (1610) and Third-Party Liability Collections Fund (1120)

FY 2025 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:
No core changes

GOVERNOR:
No core changes

HOUSE:
No core changes

SENATE:
No core changes

CONFERENCE:
No core changes

Dept Of Social Services														
	FY25 Budget Amount*	FY25 Budget FTE*	FY26 Department Request	FY26 Department Request FTE	FY26 Governor Recommended as Amended	FY26 Governor Recommended as Amended FTE	FY26 House Recommended	FY26 House Recommended FTE	FY26 Senate Recommended	FY26 Senate Recommended FTE	FY26 Truly Agreed Finally Passed	FY26 Truly Agreed Finally Passed FTE	FY26 TAFP After VETO Action	FY26 TAFP After VETO Action FTE
Section 11.620														
Tpl Contracts - 830190B														
Core														
Federal Funds	4,250,000	0.00	4,250,000	0.00	4,250,000	0.00	4,250,000	0.00	4,250,000	0.00	4,250,000	0.00	4,250,000	0.00
Expense & Equipment	4,250,000	0.00	4,250,000	0.00	4,250,000	0.00	4,250,000	0.00	4,250,000	0.00	4,250,000	0.00	4,250,000	0.00
Other Funds	4,250,000	0.00	4,250,000	0.00	4,250,000	0.00	4,250,000	0.00	4,250,000	0.00	4,250,000	0.00	4,250,000	0.00
Expense & Equipment	4,250,000	0.00	4,250,000	0.00	4,250,000	0.00	4,250,000	0.00	4,250,000	0.00	4,250,000	0.00	4,250,000	0.00
Total	\$8,500,000	0.00	\$8,500,000	0.00	\$8,500,000	0.00	\$8,500,000	0.00	\$8,500,000	0.00	\$8,500,000	0.00	\$8,500,000	0.00
Total - Tpl Contracts	\$8,500,000	0.00	\$8,500,000	0.00	\$8,500,000	0.00	\$8,500,000	0.00	\$8,500,000	0.00	\$8,500,000	0.00	\$8,500,000	0.00

*Does not include Supplementals.

DEPARTMENT OF SOCIAL SERVICES

Section 11.625 – MO HealthNet Divisions – Information Systems

Book 7, Page 1290

Description: This core request is for the continued funding of MO HealthNet's Information Systems. The Information Systems program area manages the Medicaid Management Information System (MMIS) and the contracts with the vendors that develop, operate, and maintain the system. The primary functions of the MMIS include claims and encounter processing, calculating provider payments, healthcare service provider management, drug rebate invoicing and collection, processing third party liability, federal financial reporting, administrative workflow management, and reporting and analytics.

Legal Base: State Statute: Sections 208.166 and 208.201, RSMo.; Federal Law: Social Security Act Section 1902(a) (4), 1903(a) (3) and 1915(b).; Federal Regulation: 42 CFR 433(C) and 438; Children's Health Insurance Program State Plan Amendment

Funding Sources: General Revenue (1101), FMAP Enhancement-Expansion Fund (2466), Department of Social Services Federal Fund (1610), Health Initiatives Fund (1275), and Uncompensated Care Fund (1108)

FY 2025 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

Core reduction: (\$4,000,000) (GR \$2,000,000 and FED \$2,000,000 E&E) reduction of one-time funding

GOVERNOR:

Same as Department – no additional core changes

HOUSE:

Same as Department – no additional core changes

SENATE:

Same as Department – no additional core changes

CONFERENCE:

Same as Department – no additional core changes

Dept Of Social Services														
	FY25 Budget Amount*	FY25 Budget FTE*	FY26 Department Request	FY26 Department Request FTE	FY26 Governor Recommended as Amended	FY26 Governor Recommended as Amended FTE	FY26 House Recommended	FY26 House Recommended FTE	FY26 Senate Recommended	FY26 Senate Recommended FTE	FY26 Truly Agreed Finally Passed	FY26 Truly Agreed Finally Passed FTE	FY26 TAFP After VETO Action	FY26 TAFP After VETO Action FTE
Section 11.625														
Information Systems - 830191B														
Core														
General Revenue	24,430,879	0.00	22,430,879	0.00	22,430,879	0.00	22,430,879	0.00	22,430,879	0.00	22,430,879	0.00	22,430,879	0.00
Expense & Equipment	24,430,879	0.00	22,430,879	0.00	22,430,879	0.00	22,430,879	0.00	22,430,879	0.00	22,430,879	0.00	22,430,879	0.00
Federal Funds	36,680,097	0.00	34,680,097	0.00	34,680,097	0.00	34,680,097	0.00	34,680,097	0.00	34,680,097	0.00	34,680,097	0.00
Expense & Equipment	36,680,097	0.00	34,680,097	0.00	34,680,097	0.00	34,680,097	0.00	34,680,097	0.00	34,680,097	0.00	34,680,097	0.00
Other Funds	2,021,687	0.00	2,021,687	0.00	2,021,687	0.00	2,021,687	0.00	2,021,687	0.00	2,021,687	0.00	2,021,687	0.00
Expense & Equipment	2,021,687	0.00	2,021,687	0.00	2,021,687	0.00	2,021,687	0.00	2,021,687	0.00	2,021,687	0.00	2,021,687	0.00
Total	\$63,132,663	0.00	\$59,132,663	0.00	\$59,132,663	0.00	\$59,132,663	0.00	\$59,132,663	0.00	\$59,132,663	0.00	\$59,132,663	0.00
MMIS Enhancements - NOP.83B.007														
General Revenue	0	0.00	2,710,265	0.00	2,710,265	0.00	2,710,265	0.00	2,710,265	0.00	2,710,265	0.00	2,710,265	0.00
Expense & Equipment	0	0.00	2,710,265	0.00	2,710,265	0.00	2,710,265	0.00	2,710,265	0.00	2,710,265	0.00	2,710,265	0.00
Federal Funds	0	0.00	8,130,795	0.00	8,130,795	0.00	8,130,795	0.00	8,130,795	0.00	8,130,795	0.00	8,130,795	0.00
Expense & Equipment	0	0.00	8,130,795	0.00	8,130,795	0.00	8,130,795	0.00	8,130,795	0.00	8,130,795	0.00	8,130,795	0.00
Total	\$0	0.00	\$10,841,060	0.00	\$10,841,060	0.00	\$10,841,060	0.00	\$10,841,060	0.00	\$10,841,060	0.00	\$10,841,060	0.00
The current legacy systems, MMIS (Fiscal Agent) and CMSP, have been extended through SFY 2029. As cyber events have become more advanced, the MMIS has to adapt to keep these platforms viable, more secure, and operating optimally. These enhancements will ensure that these sytems will last through the current contract periods and transition to the new, modular solutions that are being pursued.														
The current Electronic Visit Verification (EVV) Aggregator Solution allows the State to do a post-adjudication review of EVV claims to verify that the provided claims information is valid and matches the current authorizations. Any resulting discrepancies may result in overpayment and recoupment action against the provider. CMS strongly advised during the State's Certification Review that the EAS should be more proactive in the claims adjudication process and review the claims information prior to being sent to the MMIS for adjudication and payment. This request is for the ongoing operational costs related to the pre-payment review of claims.														
The current BIS-EDW ingests data primarily from the MMIS for various reports and dashboards. As the demand for data and dashboards increases, additional data sources to fulfill these requests will need to interface with the BIS-EDW to allow for these types of requests to be filled. These interfaces are expected to increase the value of the BIS-EDW and provide more transparency into the MO HealthNet program. For example, the additional data feeds will allow program, management, and executive staff to see more meaningful insight that will drive data-driven program and policy decisions.														
MMIS Federal Pick Up CTC - NOP.83B.008														
Federal Funds	0	0.00	30,973,162	0.00	30,973,162	0.00	30,973,162	0.00	30,973,162	0.00	30,973,162	0.00	30,973,162	0.00
Expense & Equipment	0	0.00	30,973,162	0.00	30,973,162	0.00	30,973,162	0.00	30,973,162	0.00	30,973,162	0.00	30,973,162	0.00
Total	\$0	0.00	\$30,973,162	0.00	\$30,973,162	0.00	\$30,973,162	0.00	\$30,973,162	0.00	\$30,973,162	0.00	\$30,973,162	0.00
This request will allow MHD Information Services to maximize the appropriated state dollars for SFY 2025 to continue and complete projects in flight. Most MMIS expenditures qualify for enhanced Federal Financial Participation (FFP) of 75% or 90% FFP, and thus requires a higher federal appropriation to utilize the enhanced FFP for these expenditures.														
MMIS Interoperability Rule - NOP.83B.009														
General Revenue	0	0.00	400,000	0.00	400,000	0.00	400,000	0.00	400,000	0.00	400,000	0.00	400,000	0.00
Expense & Equipment	0	0.00	400,000	0.00	400,000	0.00	400,000	0.00	400,000	0.00	400,000	0.00	400,000	0.00
Federal Funds	0	0.00	3,600,000	0.00	3,600,000	0.00	3,600,000	0.00	3,600,000	0.00	3,600,000	0.00	3,600,000	0.00
Expense & Equipment	0	0.00	3,600,000	0.00	3,600,000	0.00	3,600,000	0.00	3,600,000	0.00	3,600,000	0.00	3,600,000	0.00
Total	\$0	0.00	\$4,000,000	0.00	\$4,000,000	0.00	\$4,000,000	0.00	\$4,000,000	0.00	\$4,000,000	0.00	\$4,000,000	0.00

*Does not include Supplementals.

Dept Of Social Services														
	FY25 Budget Amount*	FY25 Budget FTE*	FY26 Department Request	FY26 Department Request FTE	FY26 Governor Recommended as Amended	FY26 Governor Recommended as Amended FTE	FY26 House Recommended	FY26 House Recommended FTE	FY26 Senate Recommended	FY26 Senate Recommended FTE	FY26 Truly Agreed Finally Passed	FY26 Truly Agreed Finally Passed FTE	FY26 TAFP After VETO Action	FY26 TAFP After VETO Action FTE
The Centers for Medicare & Medicaid Services (CMS) released the CMS Interoperability and Prior Authorization Final Rule (CMS-0057-F) on January 17, 2024. This final rule emphasizes the need to improve health information exchange to achieve appropriate and necessary access to health records for patients, health care providers, and payers. This final rule also focuses on efforts to improve prior authorization processes through policies and technology to help ensure that patients remain at the center of their own care. The rule enhances certain policies from the CMS Interoperability and Patient Access Final Rule (CMS-9115-F) and adds several new provisions to increase data sharing and reduce overall payer, healthcare provider, and patient burden through improvements to prior authorization practices and data exchange practices. Impacted payers are required to implement certain provisions by January 1, 2026. However, in response to stakeholder comments on the proposed rule, impacted payers have until primarily January 1, 2027, to meet the application programming interface (API) requirements in this final rule.														
MMIS Operational Cost Increase - NOP.83B.010														
General Revenue	0	0.00	1,801,676	0.00	1,801,676	0.00	1,801,676	0.00	1,801,676	0.00	1,801,676	0.00	1,801,676	0.00
Expense & Equipment	0	0.00	1,801,676	0.00	1,801,676	0.00	1,801,676	0.00	1,801,676	0.00	1,801,676	0.00	1,801,676	0.00
Federal Funds	0	0.00	6,637,527	0.00	6,637,527	0.00	6,637,527	0.00	6,637,527	0.00	6,637,527	0.00	6,637,527	0.00
Expense & Equipment	0	0.00	6,637,527	0.00	6,637,527	0.00	6,637,527	0.00	6,637,527	0.00	6,637,527	0.00	6,637,527	0.00
Total	\$0	0.00	\$8,439,203	0.00	\$8,439,203	0.00	\$8,439,203	0.00	\$8,439,203	0.00	\$8,439,203	0.00	\$8,439,203	0.00
This NDI is needed to fund the increased costs related to the contract extension for the Missouri Medicaid Information System (MMIS)/Fiscal Agent contract with Infocrossing; the contract extension for the Clinical Management Services and Pharmacy Claims and Prior Authorization (CMSP) contract with Conduent; operational costs under the Business Intelligence Solution - Enterprise Data Warehouse (BIS-EDW) contract with IBM; and operational costs under the Beneficiary Support and Premiums Collections Solution and Services (BSPC) Contract with Automated Health Systems, Inc (AHS).														
MMIS Project Management Office - NOP.83B.011														
General Revenue	0	0.00	298,272	0.00	298,272	0.00	298,272	0.00	298,272	0.00	298,272	0.00	298,272	0.00
Expense & Equipment	0	0.00	298,272	0.00	298,272	0.00	298,272	0.00	298,272	0.00	298,272	0.00	298,272	0.00
Federal Funds	0	0.00	2,684,448	0.00	2,684,448	0.00	2,684,448	0.00	2,684,448	0.00	2,684,448	0.00	2,684,448	0.00
Expense & Equipment	0	0.00	2,684,448	0.00	2,684,448	0.00	2,684,448	0.00	2,684,448	0.00	2,684,448	0.00	2,684,448	0.00
Total	\$0	0.00	\$2,982,720	0.00	\$2,982,720	0.00	\$2,982,720	0.00	\$2,982,720	0.00	\$2,982,720	0.00	\$2,982,720	0.00
MHD has been on a journey to replace its aging MMIS with modern, modular solutions. These new solutions include Pharmacy Benefit Administration Services (including a pharmacy claims processing solution), a Prior Authorization Solution, a Managed Care Compliance Tool, and the MMIS Core Claims Solution.														
Pharmacy, Prior Authorization, and the MMIS Core are the largest and most complex modules to be addressed. These modules have large risks and potential for large impacts to the participant and provider populations, including processing of claims for payment and getting necessary services authorized in a timely manner. The Pharmacy and Prior Authorization solutions are planning to kick off in the calendar year 2025 and are expected to take 18-24 months to implement as close to parallel as possible to align with the existing contract expiration. While these projects are in flight, MHD will earnestly start the planning effort to replace the MMIS Core Claims solution that needs to be in place by the end of SFY 2030.														
As these implementations are kicked off, MHD anticipates needing additional resources beyond the current state staff that will have the industry and technological expertise to help successfully manage projects of this magnitude and with this amount of associated risks. Professional services being analyzed for acquisition include Project Management Office support services, Technical Advisors, Certification Support Services, and Independent Verification and Validation services to ensure a smooth project implementation from kickoff through CMS Certification.														
MMIS Prior Auth Solution - NOP.83B.012														
General Revenue	0	0.00	900,000	0.00	900,000	0.00	900,000	0.00	900,000	0.00	900,000	0.00	900,000	0.00
Expense & Equipment	0	0.00	900,000	0.00	900,000	0.00	900,000	0.00	900,000	0.00	900,000	0.00	900,000	0.00
Federal Funds	0	0.00	8,100,000	0.00	8,100,000	0.00	8,100,000	0.00	8,100,000	0.00	8,100,000	0.00	8,100,000	0.00
Expense & Equipment	0	0.00	8,100,000	0.00	8,100,000	0.00	8,100,000	0.00	8,100,000	0.00	8,100,000	0.00	8,100,000	0.00
Total	\$0	0.00	\$9,000,000	0.00	\$9,000,000	0.00	\$9,000,000	0.00	\$9,000,000	0.00	\$9,000,000	0.00	\$9,000,000	0.00
MHD has been on a journey to replace its aging MMIS solution with modern, modular solutions. One of these new solutions is the Prior Authorization Solution, which will replace a portion of the CMSP Contract. The Prior Authorization Solution will be competitively procured to allow for the electronic submission and approval of medical, non-drug Prior Authorizations for MO HealthNet participants. MHD will pursue enhanced federal funding to support the design, development, implementation, and operations of a Prior Authoarization Solution from CMS through Advanced Planning Documents. The Solution will allow MHD to align with CMS initiatives to modernize state MMIS Solutions and also prepare the state to meet and align with federal interoperability mandates.														
MMIS Security Risk Assess - NOP.83B.013														
General Revenue	0	0.00	2,000,000	0.00	2,000,000	0.00	2,000,000	0.00	2,000,000	0.00	2,000,000	0.00	2,000,000	0.00
Expense & Equipment	0	0.00	2,000,000	0.00	2,000,000	0.00	2,000,000	0.00	2,000,000	0.00	2,000,000	0.00	2,000,000	0.00
Federal Funds	0	0.00	2,000,000	0.00	2,000,000	0.00	2,000,000	0.00	2,000,000	0.00	2,000,000	0.00	2,000,000	0.00

*Does not include Supplementals.

Dept Of Social Services														
	FY25 Budget Amount*	FY25 Budget FTE*	FY26 Department Request	FY26 Department Request FTE	FY26 Governor Recommended as Amended	FY26 Governor Recommended as Amended FTE	FY26 House Recommended	FY26 House Recommended FTE	FY26 Senate Recommended	FY26 Senate Recommended FTE	FY26 Truly Agreed Finally Passed	FY26 Truly Agreed Finally Passed FTE	FY26 TAFP After VETO Action	FY26 TAFP After VETO Action FTE
Expense & Equipment	0	0.00	2,000,000	0.00	2,000,000	0.00	2,000,000	0.00	2,000,000	0.00	2,000,000	0.00	2,000,000	0.00
Total	\$0	0.00	\$4,000,000	0.00	\$4,000,000	0.00	\$4,000,000	0.00	\$4,000,000	0.00	\$4,000,000	0.00	\$4,000,000	0.00
This project will involve contracting for security risk assessments of the Medicaid Management Information System (MMIS), Clinical Management System for Pharmacy (CMSP), Business Intelligence Solution – Enterprise Data Warehouse (BIS-EDW), Electronic Visit Verification (EVV) Aggregator Solution (EAS), Beneficiary Support and Premium Collections (BSPC) Solution, Program Integrity (PI) Solution, and the Alivia PI Solution. With the increasing attempts to compromise public systems and access personal information for use in identity theft or fraud and abuse, MO HealthNet considers it prudent to utilize independent contractors to conduct periodic security risk assessments on the health care data systems. Upon completion of the assessment, the Security Risk Assessment vendor will engage the MME Solution vendors and state staff to mitigate the risks identified in the reports. The last contract vehicle used for the Security Risk Assessment (SRA) expires January 11, 2025, and is in the process of being re-procured. With the re-procurement occurring, MHD anticipates completing the SRA in SFY 2026. Section 95.621(f) of the Social Security Act requires periodic reviews of state-automated data processing solutions of the security plans and requirements consistent with recognized industry standards. It also requires security risk assessments of state systems when new systems are implemented or when significant system changes occur to existing systems. Federal Authorization: 45 CFR Part 160 and Part 164, Subparts A and C.														
Total - Information Systems	\$63,132,663	0.00	\$129,368,808	0.00	\$129,368,808	0.00	\$129,368,808	0.00	\$129,368,808	0.00	\$129,368,808	0.00	\$129,368,808	0.00

*Does not include Supplementals.

DEPARTMENT OF SOCIAL SERVICES

Section 11.625 cont. – MO HealthNet Division – Business Intelligence Solution – Enterprise Data Warehouse (BIS-EDW)

Book 7, Page 1318

Description: This funding is for the operation of the Business Intelligence Solution-Enterprise Data Warehouse (BIS-EDW) in the Medicaid Management Information System (MMIS).

Legal Base: State Statute: Sections 208.166 and 208.201, RSMo.; Federal Law: Social Security Act Section 1902(a) (4), 1903(a) (3) and 1915(b).; Federal Regulation: 42 CFR 433(C) and 438; Children's Health Insurance Program State Plan Amendment

Funding Sources: General Revenue (1101) and Department of Social Services Federal Fund (1610)

FY 2025 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

No core changes

GOVERNOR:

No core changes

HOUSE:

No core changes

SENATE:

No core changes

CONFERENCE:

No core changes

Dept Of Social Services														
	FY25 Budget Amount*	FY25 Budget FTE*	FY26 Department Request	FY26 Department Request FTE	FY26 Governor Recommended as Amended	FY26 Governor Recommended as Amended FTE	FY26 House Recommended	FY26 House Recommended FTE	FY26 Senate Recommended	FY26 Senate Recommended FTE	FY26 Truly Agreed Finally Passed	FY26 Truly Agreed Finally Passed FTE	FY26 TAFP After VETO Action	FY26 TAFP After VETO Action FTE
Section 11.625														
MMIS Bis-Edw - 830361B														
Core														
General Revenue	1,281,409	0.00	1,281,409	0.00	1,281,409	0.00	1,281,409	0.00	1,281,409	0.00	1,281,409	0.00	1,281,409	0.00
Expense & Equipment	1,281,409	0.00	1,281,409	0.00	1,281,409	0.00	1,281,409	0.00	1,281,409	0.00	1,281,409	0.00	1,281,409	0.00
Federal Funds	3,844,227	0.00	3,844,227	0.00	3,844,227	0.00	3,844,227	0.00	3,844,227	0.00	3,844,227	0.00	3,844,227	0.00
Expense & Equipment	3,844,227	0.00	3,844,227	0.00	3,844,227	0.00	3,844,227	0.00	3,844,227	0.00	3,844,227	0.00	3,844,227	0.00
Total	\$5,125,636	0.00	\$5,125,636	0.00	\$5,125,636	0.00	\$5,125,636	0.00	\$5,125,636	0.00	\$5,125,636	0.00	\$5,125,636	0.00
MMIS Enhancements - NOP.83B.007														
General Revenue	0	0.00	650,000	0.00	650,000	0.00	650,000	0.00	650,000	0.00	650,000	0.00	650,000	0.00
Expense & Equipment	0	0.00	650,000	0.00	650,000	0.00	650,000	0.00	650,000	0.00	650,000	0.00	650,000	0.00
Federal Funds	0	0.00	3,750,000	0.00	3,750,000	0.00	3,750,000	0.00	3,750,000	0.00	3,750,000	0.00	3,750,000	0.00
Expense & Equipment	0	0.00	3,750,000	0.00	3,750,000	0.00	3,750,000	0.00	3,750,000	0.00	3,750,000	0.00	3,750,000	0.00
Total	\$0	0.00	\$4,400,000	0.00	\$4,400,000	0.00	\$4,400,000	0.00	\$4,400,000	0.00	\$4,400,000	0.00	\$4,400,000	0.00
The current legacy systems, MMIS (Fiscal Agent) and CMSP, have been extended through SFY 2029. As cyber events have become more advanced, the MMIS has to adapt to keep these platforms viable, more secure, and operating optimally. These enhancements will ensure that these sytems will last through the current contract periods and transition to the new, modular solutions that are being pursued.														
The current Electronic Visit Verification (EVV) Aggregator Solution allows the State to do a post-adjudication review of EVV claims to verify that the provided claims information is valid and matches the current authorizations. Any resulting discrepancies may result in overpayment and recoupment action against the provider. CMS strongly advised during the State's Certification Review that the EAS should be more proactive in the claims adjudication process and review the claims information prior to being sent to the MMIS for adjudication and payment. This request is for the ongoing operational costs related to the pre-payment review of claims.														
The current BIS-EDW ingests data primarily from the MMIS for various reports and dashboards. As the demand for data and dashboards increases, additional data sources to fulfill these requests will need to interface with the BIS-EDW to allow for these types of requests to be filled. These interfaces are expected to increase the value of the BIS-EDW and provide more transparency into the MO HealthNet program. For example, the additional data feeds will allow program, management, and executive staff to see more meaningful insight that will drive data-driven program and policy decisions.														
MMIS Operational Cost Increase - NOP.83B.010														
General Revenue	0	0.00	30,229	0.00	30,229	0.00	30,229	0.00	30,229	0.00	30,229	0.00	30,229	0.00
Expense & Equipment	0	0.00	30,229	0.00	30,229	0.00	30,229	0.00	30,229	0.00	30,229	0.00	30,229	0.00
Federal Funds	0	0.00	90,686	0.00	90,686	0.00	90,686	0.00	90,686	0.00	90,686	0.00	90,686	0.00
Expense & Equipment	0	0.00	90,686	0.00	90,686	0.00	90,686	0.00	90,686	0.00	90,686	0.00	90,686	0.00
Total	\$0	0.00	\$120,915	0.00	\$120,915	0.00	\$120,915	0.00	\$120,915	0.00	\$120,915	0.00	\$120,915	0.00
This NDI is needed to fund the increased costs related to the contract extension for the Missouri Medicaid Information System (MMIS)/Fiscal Agent contract with Infocrossing; the contract extension for the Clinical Management Services and Pharmacy Claims and Prior Authorization (CMSP) contract with Conduent; operational costs under the Business Intelligence Solution - Enterprise Data Warehouse (BIS-EDW) contract with IBM; and operational costs under the Beneficiary Support and Premiums Collections Solution and Services (BSPC) Contract with Automated Health Systems, Inc (AHS).														
Total - MMIS Bis-Edw	\$5,125,636	0.00	\$9,646,551	0.00	\$9,646,551	0.00	\$9,646,551	0.00	\$9,646,551	0.00	\$9,646,551	0.00	\$9,646,551	0.00

*Does not include Supplementals.

DEPARTMENT OF SOCIAL SERVICES

Section 11.625 cont. – MO HealthNet Division – Beneficiary Support and Premiums Collections Solution and Services (BSPC)-Enrollment Broker

Book 7, Page 1324

Description: This funding is for the operation of the Beneficiary Support and Premiums Collections Solution and Services (BSPC)-Enrollment Broker in the Medicaid Management Information System (MMIS).

Legal Base: State Statute: Sections 208.166 and 208.201, RSMo.; Federal Law: Social Security Act Section 1902(a) (4), 1903(a) (3) and 1915(b).; Federal Regulation: 42 CFR 433(C) and 438; Children's Health Insurance Program State Plan Amendment

Funding Sources: General Revenue (1101) and Department of Social Services Federal Fund (1610)

FY 2025 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

No core changes

GOVERNOR:

No core changes

HOUSE:

No core changes

SENATE:

No core changes

CONFERENCE:

No core changes

Dept Of Social Services														
	FY25 Budget Amount*	FY25 Budget FTE*	FY26 Department Request	FY26 Department Request FTE	FY26 Governor Recommended as Amended	FY26 Governor Recommended as Amended FTE	FY26 House Recommended	FY26 House Recommended FTE	FY26 Senate Recommended	FY26 Senate Recommended FTE	FY26 Truly Agreed Finally Passed	FY26 Truly Agreed Finally Passed FTE	FY26 TAFP After VETO Action	FY26 TAFP After VETO Action FTE
Section 11.625														
MMIS Enrollment Broker Bspc - 830362B														
Core														
General Revenue	2,623,869	0.00	2,623,869	0.00	2,623,869	0.00	2,623,869	0.00	2,623,869	0.00	2,623,869	0.00	2,623,869	0.00
Expense & Equipment	2,623,869	0.00	2,623,869	0.00	2,623,869	0.00	2,623,869	0.00	2,623,869	0.00	2,623,869	0.00	2,623,869	0.00
Federal Funds	4,574,094	0.00	4,574,094	0.00	4,574,094	0.00	4,574,094	0.00	4,574,094	0.00	4,574,094	0.00	4,574,094	0.00
Expense & Equipment	4,574,094	0.00	4,574,094	0.00	4,574,094	0.00	4,574,094	0.00	4,574,094	0.00	4,574,094	0.00	4,574,094	0.00
Total	\$7,197,963	0.00	\$7,197,963	0.00	\$7,197,963	0.00	\$7,197,963	0.00	\$7,197,963	0.00	\$7,197,963	0.00	\$7,197,963	0.00
MMIS Operational Cost Increase - NOP.83B.010														
General Revenue	0	0.00	230,593	0.00	230,593	0.00	230,593	0.00	230,593	0.00	230,593	0.00	230,593	0.00
Expense & Equipment	0	0.00	230,593	0.00	230,593	0.00	230,593	0.00	230,593	0.00	230,593	0.00	230,593	0.00
Federal Funds	0	0.00	360,025	0.00	360,025	0.00	360,025	0.00	360,025	0.00	360,025	0.00	360,025	0.00
Expense & Equipment	0	0.00	360,025	0.00	360,025	0.00	360,025	0.00	360,025	0.00	360,025	0.00	360,025	0.00
Total	\$0	0.00	\$590,618	0.00	\$590,618	0.00	\$590,618	0.00	\$590,618	0.00	\$590,618	0.00	\$590,618	0.00
This NDI is needed to fund the increased costs related to the contract extension for the Missouri Medicaid Information System (MMIS)/Fiscal Agent contract with Infocrossing; the contract extension for the Clinical Management Services and Pharmacy Claims and Prior Authorization (CMSP) contract with Conduent; operational costs under the Business Intelligence Solution - Enterprise Data Warehouse (BIS-EDW) contract with IBM; and operational costs under the Beneficiary Support and Premiums Collections Solution and Services (BSPC) Contract with Automated Health Systems, Inc (AHS).														
Total - MMIS Enrollment Broker Bspc	\$7,197,963	0.00	\$7,788,581	0.00	\$7,788,581	0.00	\$7,788,581	0.00	\$7,788,581	0.00	\$7,788,581	0.00	\$7,788,581	0.00

*Does not include Supplementals.

DEPARTMENT OF SOCIAL SERVICES

Section 11.625 cont. – MO HealthNet Division – Clinical Management Services and Pharmacy Claims and Prior Authorization (CMSP)

Book 7, Page 1330

Description: This funding is for the operation of the Clinical Management Services and Pharmacy Claims and Prior Authorization (CMSP) in the Medicaid Management Information System (MMIS).

Legal Base: State Statute: Sections 208.166 and 208.201, RSMo.; Federal Law: Social Security Act Section 1902(a) (4), 1903(a) (3) and 1915(b).; Federal Regulation: 42 CFR 433(C) and 438; Children's Health Insurance Program State Plan Amendment

Funding Sources: General Revenue (1101) and Department of Social Services Federal Fund (1610)

FY 2025 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

No core changes

GOVERNOR:

No core changes

HOUSE:

No core changes

SENATE:

No core changes

CONFERENCE:

No core changes

Dept Of Social Services														
	FY25 Budget Amount*	FY25 Budget FTE*	FY26 Department Request	FY26 Department Request FTE	FY26 Governor Recommended as Amended	FY26 Governor Recommended as Amended FTE	FY26 House Recommended	FY26 House Recommended FTE	FY26 Senate Recommended	FY26 Senate Recommended FTE	FY26 Truly Agreed Finally Passed	FY26 Truly Agreed Finally Passed FTE	FY26 TAFP After VETO Action	FY26 TAFP After VETO Action FTE
Section 11.625														
MMIS Cmsp - 830363B														
Core														
General Revenue	4,845,359	0.00	4,845,359	0.00	4,845,359	0.00	4,845,359	0.00	4,845,359	0.00	4,845,359	0.00	4,845,359	0.00
Expense & Equipment	4,845,359	0.00	4,845,359	0.00	4,845,359	0.00	4,845,359	0.00	4,845,359	0.00	4,845,359	0.00	4,845,359	0.00
Federal Funds	14,481,033	0.00	14,481,033	0.00	14,481,033	0.00	14,481,033	0.00	14,481,033	0.00	14,481,033	0.00	14,481,033	0.00
Expense & Equipment	14,481,033	0.00	14,481,033	0.00	14,481,033	0.00	14,481,033	0.00	14,481,033	0.00	14,481,033	0.00	14,481,033	0.00
Total	\$19,326,392	0.00	\$19,326,392	0.00	\$19,326,392	0.00	\$19,326,392	0.00	\$19,326,392	0.00	\$19,326,392	0.00	\$19,326,392	0.00
MMIS Operational Cost Increase - NOP.83B.010														
General Revenue	0	0.00	293,309	0.00	293,309	0.00	293,309	0.00	293,309	0.00	293,309	0.00	293,309	0.00
Expense & Equipment	0	0.00	293,309	0.00	293,309	0.00	293,309	0.00	293,309	0.00	293,309	0.00	293,309	0.00
Federal Funds	0	0.00	822,134	0.00	822,134	0.00	822,134	0.00	822,134	0.00	822,134	0.00	822,134	0.00
Expense & Equipment	0	0.00	822,134	0.00	822,134	0.00	822,134	0.00	822,134	0.00	822,134	0.00	822,134	0.00
Total	\$0	0.00	\$1,115,443	0.00	\$1,115,443	0.00	\$1,115,443	0.00	\$1,115,443	0.00	\$1,115,443	0.00	\$1,115,443	0.00
This NDI is needed to fund the increased costs related to the contract extension for the Missouri Medicaid Information System (MMIS)/Fiscal Agent contract with Infocrossing; the contract extension for the Clinical Management Services and Pharmacy Claims and Prior Authorization (CMSP) contract with Conduent; operational costs under the Business Intelligence Solution - Enterprise Data Warehouse (BIS-EDW) contract with IBM; and operational costs under the Beneficiary Support and Premiums Collections Solution and Services (BSPC) Contract with Automated Health Systems, Inc (AHS).														
Total - MMIS Cmsp	\$19,326,392	0.00	\$20,441,835	0.00	\$20,441,835	0.00	\$20,441,835	0.00	\$20,441,835	0.00	\$20,441,835	0.00	\$20,441,835	0.00

*Does not include Supplementals.

DEPARTMENT OF SOCIAL SERVICES

Section 11.625 cont. – MO HealthNet Division – Pharmacy Solutions

Book 7, Page 1336

Description: This funding is for the operation of Pharmacy Solutions in the Medicaid Management Information System (MMIS).

Legal Base: State Statute: Sections 208.166 and 208.201, RSMo.; Federal Law: Social Security Act Section 1902(a) (4), 1903(a) (3) and 1915(b).; Federal Regulation: 42 CFR 433(C) and 438; Children's Health Insurance Program State Plan Amendment

Funding Sources: General Revenue (1101) and Department of Social Services Federal Fund (1610)

FY 2025 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

No core changes

GOVERNOR:

No core changes

HOUSE:

No core changes

SENATE:

No core changes

CONFERENCE:

No core changes

Dept Of Social Services														
	FY25 Budget Amount*	FY25 Budget FTE*	FY26 Department Request	FY26 Department Request FTE	FY26 Governor Recommended as Amended	FY26 Governor Recommended as Amended FTE	FY26 House Recommended	FY26 House Recommended FTE	FY26 Senate Recommended	FY26 Senate Recommended FTE	FY26 Truly Agreed Finally Passed	FY26 Truly Agreed Finally Passed FTE	FY26 TAFP After VETO Action	FY26 TAFP After VETO Action FTE
Section 11.625														
MMIS Pharmacy Solutions - 830364B														
Core														
General Revenue	1,500,000	0.00	1,500,000	0.00	1,500,000	0.00	1,500,000	0.00	1,500,000	0.00	1,500,000	0.00	1,500,000	0.00
Expense & Equipment	1,500,000	0.00	1,500,000	0.00	1,500,000	0.00	1,500,000	0.00	1,500,000	0.00	1,500,000	0.00	1,500,000	0.00
Federal Funds	13,500,000	0.00	13,500,000	0.00	13,500,000	0.00	13,500,000	0.00	13,500,000	0.00	13,500,000	0.00	13,500,000	0.00
Expense & Equipment	13,500,000	0.00	13,500,000	0.00	13,500,000	0.00	13,500,000	0.00	13,500,000	0.00	13,500,000	0.00	13,500,000	0.00
Total	\$15,000,000	0.00	\$15,000,000	0.00	\$15,000,000	0.00	\$15,000,000	0.00	\$15,000,000	0.00	\$15,000,000	0.00	\$15,000,000	0.00
Total - MMIS Pharmacy Solutions	\$15,000,000	0.00	\$15,000,000	0.00	\$15,000,000	0.00	\$15,000,000	0.00	\$15,000,000	0.00	\$15,000,000	0.00	\$15,000,000	0.00

*Does not include Supplementals.

DEPARTMENT OF SOCIAL SERVICES

Section 11.625 cont. – MO HealthNet Division – Managed Care Contract Management Tool

Book 7, Page 1342

Description: This funding is for the operation of Managed Care Contract Management Tool in the Medicaid Management Information System (MMIS).

Legal Base: State Statute: Sections 208.166 and 208.201, RSMo.; Federal Law: Social Security Act Section 1902(a) (4), 1903(a) (3) and 1915(b).; Federal Regulation: 42 CFR 433(C) and 438; Children's Health Insurance Program State Plan Amendment

Funding Sources: General Revenue (1101) and Department of Social Services Federal Fund (1610)

FY 2025 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:
No core changes

GOVERNOR:
No core changes

HOUSE:
No core changes

SENATE:
No core changes

CONFERENCE:
No core changes

Dept Of Social Services														
	FY25 Budget Amount*	FY25 Budget FTE*	FY26 Department Request	FY26 Department Request FTE	FY26 Governor Recommended as Amended	FY26 Governor Recommended as Amended FTE	FY26 House Recommended	FY26 House Recommended FTE	FY26 Senate Recommended	FY26 Senate Recommended FTE	FY26 Truly Agreed Finally Passed	FY26 Truly Agreed Finally Passed FTE	FY26 TAFP After VETO Action	FY26 TAFP After VETO Action FTE
Section 11.625														
MMIS Mc Contract Managmnt Tool - 830365B														
Core														
General Revenue	700,000	0.00	700,000	0.00	700,000	0.00	700,000	0.00	700,000	0.00	700,000	0.00	700,000	0.00
Expense & Equipment	700,000	0.00	700,000	0.00	700,000	0.00	700,000	0.00	700,000	0.00	700,000	0.00	700,000	0.00
Federal Funds	6,300,000	0.00	6,300,000	0.00	6,300,000	0.00	6,300,000	0.00	6,300,000	0.00	6,300,000	0.00	6,300,000	0.00
Expense & Equipment	6,300,000	0.00	6,300,000	0.00	6,300,000	0.00	6,300,000	0.00	6,300,000	0.00	6,300,000	0.00	6,300,000	0.00
Total	\$7,000,000	0.00	\$7,000,000	0.00	\$7,000,000	0.00	\$7,000,000	0.00	\$7,000,000	0.00	\$7,000,000	0.00	\$7,000,000	0.00
Total - MMIS Mc Contract Managmnt Tool	\$7,000,000	0.00	\$7,000,000	0.00	\$7,000,000	0.00	\$7,000,000	0.00	\$7,000,000	0.00	\$7,000,000	0.00	\$7,000,000	0.00

*Does not include Supplementals.

DEPARTMENT OF SOCIAL SERVICES

Section 11.630 – MO HealthNet Division – Closed-Loop Social Service Referral Platform

Book 7, Page 1348

Description: This section provides funding for the acquisition of technology for a statewide closed-loop social service referral platform for addressing the social determinants of health. Social determinants of health include housing, food security, transportation, financial strain, interpersonal safety, and other factors that affect health and quality of life.

Legal Base: HB 11

Funding Sources: General Revenue (1101) and Department of Social Services Federal Fund (1610)

FY 2025 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

No core changes

GOVERNOR:

No core changes

HOUSE:

No core changes

SENATE:

No core changes

CONFERENCE:

No core changes

GOVERNOR VETO:

New Decision Item Veto: (\$2,000,000) (GR \$1,000,000 and FED \$1,000,000 E&E) – Unite Missouri NDI

Dept Of Social Services														
	FY25 Budget Amount*	FY25 Budget FTE*	FY26 Department Request	FY26 Department Request FTE	FY26 Governor Recommended as Amended	FY26 Governor Recommended as Amended FTE	FY26 House Recommended	FY26 House Recommended FTE	FY26 Senate Recommended	FY26 Senate Recommended FTE	FY26 Truly Agreed Finally Passed	FY26 Truly Agreed Finally Passed FTE	FY26 TAFP After VETO Action	FY26 TAFP After VETO Action FTE
Section 11.630														
Ss Tech For Health Outcomes - 830192B														
Core														
General Revenue	2,500,000	0.00	2,500,000	0.00	2,500,000	0.00	2,500,000	0.00	2,500,000	0.00	2,500,000	0.00	2,500,000	0.00
Expense & Equipment	2,500,000	0.00	2,500,000	0.00	2,500,000	0.00	2,500,000	0.00	2,500,000	0.00	2,500,000	0.00	2,500,000	0.00
Federal Funds	2,500,000	0.00	2,500,000	0.00	2,500,000	0.00	2,500,000	0.00	2,500,000	0.00	2,500,000	0.00	2,500,000	0.00
Expense & Equipment	2,500,000	0.00	2,500,000	0.00	2,500,000	0.00	2,500,000	0.00	2,500,000	0.00	2,500,000	0.00	2,500,000	0.00
Total	\$5,000,000	0.00	\$5,000,000	0.00	\$5,000,000	0.00	\$5,000,000	0.00	\$5,000,000	0.00	\$5,000,000	0.00	\$5,000,000	0.00
Unite Missouri - NOP.HS.134														
General Revenue	0	0.00	0	0.00	0	0.00	2,000,000	0.00	2,000,000	0.00	2,000,000	0.00	1,000,000	0.00
Expense & Equipment	0	0.00	0	0.00	0	0.00	2,000,000	0.00	2,000,000	0.00	2,000,000	0.00	1,000,000	0.00
Federal Funds	0	0.00	0	0.00	0	0.00	2,000,000	0.00	2,000,000	0.00	2,000,000	0.00	1,000,000	0.00
Expense & Equipment	0	0.00	0	0.00	0	0.00	2,000,000	0.00	2,000,000	0.00	2,000,000	0.00	1,000,000	0.00
Total	\$0	0.00	\$0	0.00	\$0	0.00	\$4,000,000	0.00	\$4,000,000	0.00	\$4,000,000	0.00	\$2,000,000	0.00
Total - Ss Tech For Health Outcomes	\$5,000,000	0.00	\$5,000,000	0.00	\$5,000,000	0.00	\$9,000,000	0.00	\$9,000,000	0.00	\$9,000,000	0.00	\$7,000,000	0.00

*Does not include Supplementals.

DEPARTMENT OF SOCIAL SERVICES

Section 11.635 – MO HealthNet Division – Health Data Utility (HDU)

Book 7, Page 1353

Description: This program will enhance Missouri's existing Health Information Exchange (HIE) infrastructure to support data analysis at the MO HealthNet Division (MHD) and across the Missouri Medicaid Enterprise through the creation of a Health Data Utility (HDU). Data will be used to enhance care delivery and system efficiency within MHD, and improve care delivery and health outcomes in underserved communities.

Legal Base: HB 11

Funding Sources: General Revenue (1101) and Department of Social Services Federal Fund (1610)

FY 2025 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

No core changes

GOVERNOR:

No core changes

HOUSE:

No core changes

SENATE:

No core changes

CONFERENCE:

No core changes

Dept Of Social Services														
	FY25 Budget Amount*	FY25 Budget FTE*	FY26 Department Request	FY26 Department Request FTE	FY26 Governor Recommended as Amended	FY26 Governor Recommended as Amended FTE	FY26 House Recommended	FY26 House Recommended FTE	FY26 Senate Recommended	FY26 Senate Recommended FTE	FY26 Truly Agreed Finally Passed	FY26 Truly Agreed Finally Passed FTE	FY26 TAFP After VETO Action	FY26 TAFP After VETO Action FTE
Section 11.635														
Health Data Utility - 830198B														
Core														
General Revenue	5,000,000	0.00	5,000,000	0.00	5,000,000	0.00	5,000,000	0.00	5,000,000	0.00	5,000,000	0.00	5,000,000	0.00
Expense & Equipment	5,000,000	0.00	5,000,000	0.00	5,000,000	0.00	5,000,000	0.00	5,000,000	0.00	5,000,000	0.00	5,000,000	0.00
Federal Funds	45,000,000	0.00	45,000,000	0.00	45,000,000	0.00	45,000,000	0.00	45,000,000	0.00	45,000,000	0.00	45,000,000	0.00
Expense & Equipment	45,000,000	0.00	45,000,000	0.00	45,000,000	0.00	45,000,000	0.00	45,000,000	0.00	45,000,000	0.00	45,000,000	0.00
Total	\$50,000,000	0.00	\$50,000,000	0.00	\$50,000,000	0.00	\$50,000,000	0.00	\$50,000,000	0.00	\$50,000,000	0.00	\$50,000,000	0.00
Total - Health Data Utility	\$50,000,000	0.00	\$50,000,000	0.00	\$50,000,000	0.00	\$50,000,000	0.00	\$50,000,000	0.00	\$50,000,000	0.00	\$50,000,000	0.00

*Does not include Supplementals.

DEPARTMENT OF SOCIAL SERVICES
Section 11.640 – MO HealthNet Division – Show-Me Home

Book 7, Page 1358

Description: This budget item funds administration of the Show-Me Home (formerly Money Follows the Person) program which transitions Medicaid-eligible individuals who are elderly or disabled from nursing facilities or state-owned habilitation centers to Home and Community Based Services (HCBS).

Legal Base: Section 6071 of the Federal Deficit Reduction Act of 2005; PL 109-171, and amended by the Affordable Care Act, Section 2403

Funding Sources: Department of Social Services Federal Fund (1610)

FY 2025 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

No core changes

GOVERNOR:

No core changes

HOUSE:

No core changes

SENATE:

No core changes

CONFERENCE:

No core changes

Dept Of Social Services														
	FY25 Budget Amount*	FY25 Budget FTE*	FY26 Department Request	FY26 Department Request FTE	FY26 Governor Recommended as Amended	FY26 Governor Recommended as Amended FTE	FY26 House Recommended	FY26 House Recommended FTE	FY26 Senate Recommended	FY26 Senate Recommended FTE	FY26 Truly Agreed Finally Passed	FY26 Truly Agreed Finally Passed FTE	FY26 TAFP After VETO Action	FY26 TAFP After VETO Action FTE
Section 11.640														
Money Follows The Person Grant - 830199B														
Core														
Federal Funds	1,532,549	0.00	1,532,549	0.00	1,532,549	0.00	1,532,549	0.00	1,532,549	0.00	1,532,549	0.00	1,532,549	0.00
Expense & Equipment	392,549	0.00	392,549	0.00	392,549	0.00	392,549	0.00	392,549	0.00	392,549	0.00	392,549	0.00
Program-Specific	1,140,000	0.00	1,140,000	0.00	1,140,000	0.00	1,140,000	0.00	1,140,000	0.00	1,140,000	0.00	1,140,000	0.00
Total	\$1,532,549	0.00	\$1,532,549	0.00	\$1,532,549	0.00	\$1,532,549	0.00	\$1,532,549	0.00	\$1,532,549	0.00	\$1,532,549	0.00
Total - Money Follows The Person Grant	\$1,532,549	0.00	\$1,532,549	0.00	\$1,532,549	0.00	\$1,532,549	0.00	\$1,532,549	0.00	\$1,532,549	0.00	\$1,532,549	0.00

*Does not include Supplementals.

DEPARTMENT OF SOCIAL SERVICES

Section 11.700 – MO HealthNet Division – Pharmacy Services

Book 7, Page 1363

Description: This item funds the pharmacy program which is necessary to maintain pharmacy reimbursement at a sufficient level to ensure quality health care and provider participation. Funding provides pharmacy services for both managed care and fee-for-service populations. Beginning on October 1, 2009, pharmacy services were carved-out of the managed care capitation rates and the state began administering the pharmacy benefit for participants enrolled in managed care as well as participants enrolled in fee-for-service.

Legal Base: State Statute: Sections 208.152 and 208.166, RSMo.; Federal Law: Social Security Act Section 1902(a) (12).; State Regulation: 13 CSR 70-20.; Federal Regulation: 42 CFR 440.120

Funding Sources: General Revenue (1101), Title XIX-Federal Fund (1163), Pharmacy Rebates Fund (1114), Third Party Liability Collections Fund (1120), Pharmacy Reimbursement Allowance Fund (1144), Health Initiatives Fund (1275), and Premium Fund (1885)

FY 2025 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

Core reduction: (\$43,823,402) FED PSD reduction due to estimated lapse

GOVERNOR:

Core reduction: (\$3,379,279) GR PSD reduction due to change in the Federal Medical Assistance Percentage (FMAP) rate – see New Decision Item

HOUSE:

Core reduction: (\$3,079,494) (GR \$1,250,000 and FED \$1,829,494 PSD) reduction due to estimated lapse
(\$146,835,567) (GR \$6,085,329 and FED \$140,750,238 PSD) reduction based on January end-of-month (EOM) projections

SENATE:

Same as House – no additional core changes

CONFERENCE:

Same as House – no additional core changes

Dept Of Social Services														
	FY25 Budget Amount*	FY25 Budget FTE*	FY26 Department Request	FY26 Department Request FTE	FY26 Governor Recommended as Amended	FY26 Governor Recommended as Amended FTE	FY26 House Recommended	FY26 House Recommended FTE	FY26 Senate Recommended	FY26 Senate Recommended FTE	FY26 Truly Agreed Finally Passed	FY26 Truly Agreed Finally Passed FTE	FY26 TAFP After VETO Action	FY26 TAFP After VETO Action FTE
Section 11.700														
Pharmacy - 830201B														
Core														
General Revenue	165,120,479	0.00	165,120,479	0.00	161,741,200	0.00	154,405,871	0.00	154,405,871	0.00	154,405,871	0.00	154,405,871	0.00
Program-Specific	165,120,479	0.00	165,120,479	0.00	161,741,200	0.00	154,405,871	0.00	154,405,871	0.00	154,405,871	0.00	154,405,871	0.00
Federal Funds	907,441,820	0.00	863,618,418	0.00	863,618,418	0.00	721,038,686	0.00	721,038,686	0.00	721,038,686	0.00	721,038,686	0.00
Program-Specific	907,441,820	0.00	863,618,418	0.00	863,618,418	0.00	721,038,686	0.00	721,038,686	0.00	721,038,686	0.00	721,038,686	0.00
Other Funds	307,772,668	0.00	307,772,668	0.00	307,772,668	0.00	307,772,668	0.00	307,772,668	0.00	307,772,668	0.00	307,772,668	0.00
Program-Specific	307,772,668	0.00	307,772,668	0.00	307,772,668	0.00	307,772,668	0.00	307,772,668	0.00	307,772,668	0.00	307,772,668	0.00
Total	\$1,380,334,967	0.00	\$1,336,511,565	0.00	\$1,333,132,286	0.00	\$1,183,217,225	0.00	\$1,183,217,225	0.00	\$1,183,217,225	0.00	\$1,183,217,225	0.00
Pharmacy Non-Spec PMPM - NOP.83B.020														
General Revenue	0	0.00	5,869,206	0.00	5,979,518	0.00	2,989,759	0.00	5,979,518	0.00	2,989,759	0.00	2,989,759	0.00
Expense & Equipment	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
Program-Specific	0	0.00	5,869,206	0.00	5,979,518	0.00	2,989,759	0.00	5,979,518	0.00	2,989,759	0.00	2,989,759	0.00
Federal Funds	0	0.00	11,049,807	0.00	10,939,495	0.00	5,469,748	0.00	10,939,495	0.00	5,469,748	0.00	5,469,748	0.00
Expense & Equipment	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
Program-Specific	0	0.00	11,049,807	0.00	10,939,495	0.00	5,469,748	0.00	10,939,495	0.00	5,469,748	0.00	5,469,748	0.00
Total	\$0	0.00	\$16,919,013	0.00	\$16,919,013	0.00	\$8,459,507	0.00	\$16,919,013	0.00	\$8,459,507	0.00	\$8,459,507	0.00
Funds are needed to address the anticipated increases in the pharmacy program due to new drugs, therapies, and inflation. This decision item requests funding for the ongoing inflation of pharmaceuticals and the anticipated increase in pharmacy expenditures attributed to non-specialty drugs. State statute: Section 208.201, RSMo; Federal Law: Social Security Act Section 1902(a)(4); Federal Regulations: 42 CFR, Part 432.														
Pharmacy Specialty PMPM - NOP.83B.022														
General Revenue	0	0.00	20,295,102	0.00	20,676,549	0.00	10,338,274	0.00	20,676,549	0.00	10,338,274	0.00	10,338,274	0.00
Expense & Equipment	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
Program-Specific	0	0.00	20,295,102	0.00	20,676,549	0.00	10,338,274	0.00	20,676,549	0.00	10,338,274	0.00	10,338,274	0.00
Federal Funds	0	0.00	38,209,083	0.00	37,827,636	0.00	18,913,818	0.00	37,827,636	0.00	18,913,818	0.00	18,913,818	0.00
Expense & Equipment	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
Program-Specific	0	0.00	38,209,083	0.00	37,827,636	0.00	18,913,818	0.00	37,827,636	0.00	18,913,818	0.00	18,913,818	0.00
Total	\$0	0.00	\$58,504,185	0.00	\$58,504,185	0.00	\$29,252,092	0.00	\$58,504,185	0.00	\$29,252,092	0.00	\$29,252,092	0.00
Funds are needed to address the anticipated increases in the pharmacy program due to new drugs, therapies, and inflation. This decision item requests funding for the ongoing inflation of pharmaceuticals and the anticipated increase in pharmacy expenditures attributed to specialty drugs. Specialty drugs account for the majority of the projected increase in pharmacy expenditures. State statute: Section 208.201, RSMo. Federal Law: Social Security Act Section 1902(a)(4). Federal Regulations: 42 CFR, Part 432.														
MO HealthNet Cost to Continue - NOP.83B.032														
General Revenue	0	0.00	19,092,661	0.00	8,213,254	0.00	0	0.00	0	0.00	0	0.00	0	0.00
Program-Specific	0	0.00	19,092,661	0.00	8,213,254	0.00	0	0.00	0	0.00	0	0.00	0	0.00
Total	\$0	0.00	\$19,092,661	0.00	\$8,213,254	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00
Funds are requested for estimated costs in the FY 2025 budget. These amounts are based on actual MO HealthNet program expenditures through November 2024 and historical trends. It is anticipated that additional funding will be necessary to operate current MO HealthNet programs for Fiscal Year 2026. Programs with estimated shortfalls are listed below.														

*Does not include Supplementals.

Dept Of Social Services														
	FY25 Budget Amount*	FY25 Budget FTE*	FY26 Department Request	FY26 Department Request FTE	FY26 Governor Recommended as Amended	FY26 Governor Recommended as Amended FTE	FY26 House Recommended	FY26 House Recommended FTE	FY26 Senate Recommended	FY26 Senate Recommended FTE	FY26 Truly Agreed Finally Passed	FY26 Truly Agreed Finally Passed FTE	FY26 TAFP After VETO Action	FY26 TAFP After VETO Action FTE
FMAP Adjustment - SWO.GV.001														
Federal Funds	0	0.00	0	0.00	3,379,279	0.00	3,379,279	0.00	3,379,279	0.00	3,379,279	0.00	3,379,279	0.00
Program-Specific	0	0.00	0	0.00	3,379,279	0.00	3,379,279	0.00	3,379,279	0.00	3,379,279	0.00	3,379,279	0.00
Total	\$0	0.00	\$0	0.00	\$3,379,279	0.00	\$3,379,279	0.00	\$3,379,279	0.00	\$3,379,279	0.00	\$3,379,279	0.00
This funding is requested to compensate for the change in the Federal Medical Assistance Percentage (FMAP). Each year the Centers for Medicare and Medicaid Services (CMS) revises the percentage of Medicaid costs the federal government will reimburse to each state. FMAP varies by state and is based on criteria such as per capita income. Effective October 1, 2025, the blended FMAP rate will decrease from 65.500% to 64.658%. The enhanced FMAP rate for the CHIP children and the Women with Breast or Cervical Cancer program will decrease from 75.853% to 75.263%. This change will result in a net cost shift from Federal to GR funds for the Departments of Mental Health, Health and Senior Services, and Social Services. In order to realign the federal match, the Governor recommended an NDI for additional general revenue authority as well as corresponding core reductions in federal authority.														
The Federal Authority is Social Security Act 1905(b).														
Total - Pharmacy	\$1,380,334,967	0.00	\$1,431,027,424	0.00	\$1,420,148,017	0.00	\$1,224,308,103	0.00	\$1,262,019,702	0.00	\$1,224,308,103	0.00	\$1,224,308,103	0.00

*Does not include Supplementals.

DEPARTMENT OF SOCIAL SERVICES

Section 11.700 cont. – MO HealthNet Division – Pharmacy Medicare Part D-Clawback

Book 7, Page 1370

Description: This core request is due to the Medicare Prescription Drug, Improvement, and Modernization Act (MMA) of 2003 that required that all individuals who are eligible for both Medicare and Medicaid, also known as dual eligibles, receive their prescription drugs through the Medicare Part D program. This change resulted in a significant shift in benefits for elderly and disabled dual eligible participants because they receive their drugs through a prescription drug plan (PDP) rather than through the state's MO HealthNet program. States are required to make a monthly payment to the federal government in lieu of the money that the states would have spent on providing prescription drugs to participants in the MO HealthNet program. The federal government refers to this payment as the Phased-Down State Contribution, also referred to as Clawback. This Clawback payment is a funding source for the Medicare Part D program.

Legal Basis: Federal Law: Medicare Prescription Drug Improvement and Modernization Act (MMA) of 2003, P.L. 108-173

Funding Sources: General Revenue (1101)

FY 2025 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

No core changes

GOVERNOR:

No core changes

HOUSE:

Core reduction: (\$55,000) GR PSD reduction

SENATE:

Same as House – no additional core changes

CONFERENCE:

Same as House – no additional core changes

Dept Of Social Services														
	FY25 Budget Amount*	FY25 Budget FTE*	FY26 Department Request	FY26 Department Request FTE	FY26 Governor Recommended as Amended	FY26 Governor Recommended as Amended FTE	FY26 House Recommended	FY26 House Recommended FTE	FY26 Senate Recommended	FY26 Senate Recommended FTE	FY26 Truly Agreed Finally Passed	FY26 Truly Agreed Finally Passed FTE	FY26 TAFP After VETO Action	FY26 TAFP After VETO Action FTE
Section 11.700														
Pharmacy-Med Part D-Clawback - 830202B														
Core														
General Revenue	353,126,063	0.00	353,126,063	0.00	353,126,063	0.00	353,071,063	0.00	353,071,063	0.00	353,071,063	0.00	353,071,063	0.00
Program-Specific	353,126,063	0.00	353,126,063	0.00	353,126,063	0.00	353,071,063	0.00	353,071,063	0.00	353,071,063	0.00	353,071,063	0.00
Total	\$353,126,063	0.00	\$353,126,063	0.00	\$353,126,063	0.00	\$353,071,063	0.00	\$353,071,063	0.00	\$353,071,063	0.00	\$353,071,063	0.00
MO HealthNet Cost to Continue - NOP.83B.032														
General Revenue	0	0.00	0	0.00	30,406,147	0.00	30,406,147	0.00	30,406,147	0.00	30,406,147	0.00	30,406,147	0.00
Program-Specific	0	0.00	0	0.00	30,406,147	0.00	30,406,147	0.00	30,406,147	0.00	30,406,147	0.00	30,406,147	0.00
Total	\$0	0.00	\$0	0.00	\$30,406,147	0.00	\$30,406,147	0.00	\$30,406,147	0.00	\$30,406,147	0.00	\$30,406,147	0.00
Funds are requested for estimated costs in the FY 2025 budget. These amounts are based on actual MO HealthNet program expenditures through November 2024 and historical trends. It is anticipated that additional funding will be necessary to operate current MO HealthNet programs for Fiscal Year 2026. Programs with estimated shortfalls are listed below.														
Total - Pharmacy-Med Part D-Clawback	\$353,126,063	0.00	\$353,126,063	0.00	\$383,532,210	0.00	\$383,477,210	0.00	\$383,477,210	0.00	\$383,477,210	0.00	\$383,477,210	0.00

*Does not include Supplementals.

DEPARTMENT OF SOCIAL SERVICES

Section 11.705 – MO HealthNet Division – Missouri Rx Plan (MORx)

Book 7, Page 1377

Description: The Missouri Rx Plan (MORx) provides pharmaceutical assistance to Medicare/Medicaid dual-eligibles. SB 514 (2019) removed the MO HealthNet dual-eligibility requirement while retaining the income limitations, subject to appropriations. MORx facilitates the coordination of benefits between the MORx plan and the federal Medicare Part D drug benefit program established by the Medicare Prescription Drug Improvement and Modernization Act of 2003 (MMA), P.L. 108-173, and enrolls individuals in the program.

Legal Basis: State Statute: Sections 208.780 through 208.798, RSMo.; Federal Law: Medicare Prescription Drug Improvement and Modernization Act of 2003, P.L. 108-173

Funding Sources: General Revenue (1101) and Missouri Rx Plan Fund (1779)

FY 2025 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

Core reduction: (\$182,502) GR PSD reduction due to estimated lapse

GOVERNOR:

Same as Department – no additional core changes

HOUSE:

Core restoration: \$21,772 GR PSD restoration based on January end-of-month (EOM) projections – reversed a portion of Department’s change

SENATE:

Same as House – no additional core changes

CONFERENCE:

Same as House – no additional core changes

Dept Of Social Services														
	FY25 Budget Amount*	FY25 Budget FTE*	FY26 Department Request	FY26 Department Request FTE	FY26 Governor Recommended as Amended	FY26 Governor Recommended as Amended FTE	FY26 House Recommended	FY26 House Recommended FTE	FY26 Senate Recommended	FY26 Senate Recommended FTE	FY26 Truly Agreed Finally Passed	FY26 Truly Agreed Finally Passed FTE	FY26 TAFP After VETO Action	FY26 TAFP After VETO Action FTE
Section 11.705														
Missouri Rx Plan - 830203B														
Core														
General Revenue	1,396,065	0.00	1,213,563	0.00	1,213,563	0.00	1,235,335	0.00	1,235,335	0.00	1,235,335	0.00	1,235,335	0.00
Program-Specific	1,396,065	0.00	1,213,563	0.00	1,213,563	0.00	1,235,335	0.00	1,235,335	0.00	1,235,335	0.00	1,235,335	0.00
Other Funds	1,188,774	0.00	1,188,774	0.00	1,188,774	0.00	1,188,774	0.00	1,188,774	0.00	1,188,774	0.00	1,188,774	0.00
Program-Specific	1,188,774	0.00	1,188,774	0.00	1,188,774	0.00	1,188,774	0.00	1,188,774	0.00	1,188,774	0.00	1,188,774	0.00
Total	\$2,584,839	0.00	\$2,402,337	0.00	\$2,402,337	0.00	\$2,424,109	0.00	\$2,424,109	0.00	\$2,424,109	0.00	\$2,424,109	0.00
Total - Missouri Rx Plan	\$2,584,839	0.00	\$2,402,337	0.00	\$2,402,337	0.00	\$2,424,109	0.00	\$2,424,109	0.00	\$2,424,109	0.00	\$2,424,109	0.00

*Does not include Supplementals.

DEPARTMENT OF SOCIAL SERVICES
Section 11.706 – MO HealthNet Division – Rx Outreach

N/A

Description: This section provides funding for a non-profit pharmacy to expand services for a medication access and affordability program serving uninsured individuals ages 55 to 65 with a chronic disease in Maryland Heights.

Legal Basis: HB 11
Funding Sources: General Revenue (1101)
FY 2025 GR W/H: N/A

CORE ADJUSTMENTS:

DEPARTMENT:
New Decision Item – recommended by the Senate

GOVERNOR:
New Decision Item – recommended by the Senate

HOUSE:
New Decision Item – recommended by the Senate

SENATE:
New Decision Item: \$100,000 GR PSD

CONFERENCE:
New Decision Item not recommended

Dept Of Social Services														
	FY25 Budget Amount*	FY25 Budget FTE*	FY26 Department Request	FY26 Department Request FTE	FY26 Governor Recommended as Amended	FY26 Governor Recommended as Amended FTE	FY26 House Recommended	FY26 House Recommended FTE	FY26 Senate Recommended	FY26 Senate Recommended FTE	FY26 Truly Agreed Finally Passed	FY26 Truly Agreed Finally Passed FTE	FY26 TAFP After VETO Action	FY26 TAFP After VETO Action FTE
Section 11.706														
Rx Outreach-Maryland Heights - 830447B														
Rx Outreach - NOP.SN.194														
General Revenue	0	0.00	0	0.00	0	0.00	0	0.00	100,000	0.00	0	0.00	0	0.00
Program-Specific	0	0.00	0	0.00	0	0.00	0	0.00	100,000	0.00	0	0.00	0	0.00
Total	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$100,000	0.00	\$0	0.00	\$0	0.00
Total - Rx Outreach-Maryland Heights	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$100,000	0.00	\$0	0.00	\$0	0.00

*Does not include Supplementals.

DEPARTMENT OF SOCIAL SERVICES

Section 11.710 – MO HealthNet Division – Pharmacy Federal Reimbursement Allowance (FRA) Payments

Book 7, Page 1382

Description: This item provides funding that are used to provide enhanced dispensing fee payment rates using the Pharmacy Reimbursement Allowance under the Title XIX of the Social Security Act as a General Revenue equivalent. Pharmacies are assessed a provider tax for the privilege of doing business in the state. The assessment is a general revenue equivalent and, when used to make valid Medicaid payments, can earn federal Medicaid matching funds. These earnings fund pharmacy expenditures in the MO HealthNet program. The pharmacy tax was established in 2002. The tax is assessed on gross prescription receipts of all pharmacies in the state. In FY 2024, 1,233 pharmacy facilities were assessed, and 1,220 pharmacy facilities participated in the MO HealthNet program. The assessments in FY 2024 were \$38.2 million.

Legal Base: State Statute: Section 338.500, RSMo.; Federal Law: Social Security Act Section 1903(w); State Regulation: 13 CSR 70-20; Federal Regulation: 42 CFR 433 Subpart B

Funding Sources: Title XIX-Federal Fund (1163) and Pharmacy Reimbursement Allowance Fund (1144)

FY 2025 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:
No core changes

GOVERNOR:
No core changes

HOUSE:
No core changes

SENATE:
No core changes

CONFERENCE:
No core changes

Dept Of Social Services														
	FY25 Budget Amount*	FY25 Budget FTE*	FY26 Department Request	FY26 Department Request FTE	FY26 Governor Recommended as Amended	FY26 Governor Recommended as Amended FTE	FY26 House Recommended	FY26 House Recommended FTE	FY26 Senate Recommended	FY26 Senate Recommended FTE	FY26 Truly Agreed Finally Passed	FY26 Truly Agreed Finally Passed FTE	FY26 TAFP After VETO Action	FY26 TAFP After VETO Action FTE
Section 11.710														
Pharmacy Fra - 830204B														
Core														
Federal Funds	37,990,000	0.00	37,990,000	0.00	37,990,000	0.00	37,990,000	0.00	37,990,000	0.00	37,990,000	0.00	37,990,000	0.00
Program-Specific	37,990,000	0.00	37,990,000	0.00	37,990,000	0.00	37,990,000	0.00	37,990,000	0.00	37,990,000	0.00	37,990,000	0.00
Other Funds	20,010,000	0.00	20,010,000	0.00	20,010,000	0.00	20,010,000	0.00	20,010,000	0.00	20,010,000	0.00	20,010,000	0.00
Program-Specific	20,010,000	0.00	20,010,000	0.00	20,010,000	0.00	20,010,000	0.00	20,010,000	0.00	20,010,000	0.00	20,010,000	0.00
Total	\$58,000,000	0.00	\$58,000,000	0.00	\$58,000,000	0.00	\$58,000,000	0.00	\$58,000,000	0.00	\$58,000,000	0.00	\$58,000,000	0.00
Total - Pharmacy Fra	\$58,000,000	0.00	\$58,000,000	0.00	\$58,000,000	0.00	\$58,000,000	0.00	\$58,000,000	0.00	\$58,000,000	0.00	\$58,000,000	0.00

*Does not include Supplementals.

DEPARTMENT OF SOCIAL SERVICES

Section 11.715 – MO HealthNet Division – Physician's Services

Book 7, Page 1387

Description: This section provides funding for physician-related services provided to fee-for-service MO HealthNet participants. Services are provided by physicians, advanced practitioners, chiropractors, podiatrists, and certain behavioral health providers at various locations. The majority of services provided by physician-related professionals are reimbursed on a fee schedule, whereby each procedure or claim is priced individually by a medical consultant based on the unique circumstances of the case. Certain procedures are only reimbursable with prior approval. A few services are reimbursed manually.

Legal Base: State Statute: Sections 208.153 and 208.166 RSMo.; Federal Law: Social Security Act Sections 1905(a) (2), (3), (5), (6), (9), (17), (21); 1905(r) and 1915(d); Federal Regulation: 42 CFR 440.210, 440.500, 412.113(c) and 441 Subpart B

Funding Sources: General Revenue (1101), Title XIX-Federal Fund (1163), Pharmacy Reimbursement Allowance Fund (1144), Health Initiatives Fund (1275), Third Party Liability Collections Fund (1120)

FY 2025 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

No core changes

GOVERNOR:

Core reduction: (\$5,051,266) FED PSD reduction due to change in the Federal Medical Assistance Percentage (FMAP) rate – see New Decision Item

HOUSE:

Same as Governor – no additional core changes

SENATE:

Same as Governor – no additional core changes

CONFERENCE:

Same as Governor – no additional core changes

	Dept Of Social Services													
	FY25 Budget Amount*	FY25 Budget FTE*	FY26 Department Request	FY26 Department Request FTE	FY26 Governor Recommended as Amended	FY26 Governor Recommended as Amended FTE	FY26 House Recommended	FY26 House Recommended FTE	FY26 Senate Recommended	FY26 Senate Recommended FTE	FY26 Truly Agreed Finally Passed	FY26 Truly Agreed Finally Passed FTE	FY26 TAFP After VETO Action	FY26 TAFP After VETO Action FTE
Section 11.715														
Physician Related Prof - 830205B														
Core														
General Revenue	199,859,558	0.00	199,859,558	0.00	199,859,558	0.00	199,859,558	0.00	199,859,558	0.00	199,859,558	0.00	199,859,558	0.00
Program-Specific	199,859,558	0.00	199,859,558	0.00	199,859,558	0.00	199,859,558	0.00	199,859,558	0.00	199,859,558	0.00	199,859,558	0.00
Federal Funds	379,215,269	0.00	379,215,269	0.00	374,164,003	0.00	374,164,003	0.00	374,164,003	0.00	374,164,003	0.00	374,164,003	0.00
Program-Specific	379,215,269	0.00	379,215,269	0.00	374,164,003	0.00	374,164,003	0.00	374,164,003	0.00	374,164,003	0.00	374,164,003	0.00
Other Funds	1,678,127	0.00	1,678,127	0.00	1,678,127	0.00	1,678,127	0.00	1,678,127	0.00	1,678,127	0.00	1,678,127	0.00
Program-Specific	1,678,127	0.00	1,678,127	0.00	1,678,127	0.00	1,678,127	0.00	1,678,127	0.00	1,678,127	0.00	1,678,127	0.00
Total	\$580,752,954	0.00	\$580,752,954	0.00	\$575,701,688	0.00	\$575,701,688	0.00	\$575,701,688	0.00	\$575,701,688	0.00	\$575,701,688	0.00
MO HealthNet Cost to Continue - NOP.83B.032														
General Revenue	0	0.00	5,345,996	0.00	3,112,024	0.00	210,950	0.00	210,950	0.00	210,950	0.00	210,950	0.00
Program-Specific	0	0.00	5,345,996	0.00	3,112,024	0.00	210,950	0.00	210,950	0.00	210,950	0.00	210,950	0.00
Federal Funds	0	0.00	23,740,092	0.00	8,280,090	0.00	2,772,348	0.00	2,772,348	0.00	2,772,348	0.00	2,772,348	0.00
Program-Specific	0	0.00	23,740,092	0.00	8,280,090	0.00	2,772,348	0.00	2,772,348	0.00	2,772,348	0.00	2,772,348	0.00
Total	\$0	0.00	\$29,086,088	0.00	\$11,392,114	0.00	\$2,983,298	0.00	\$2,983,298	0.00	\$2,983,298	0.00	\$2,983,298	0.00
Funds are requested for estimated costs in the FY 2025 budget. These amounts are based on actual MO HealthNet program expenditures through November 2024 and historical trends. It is anticipated that additional funding will be necessary to operate current MO HealthNet programs for Fiscal Year 2026. Programs with estimated shortfalls are listed below.														
Anesthesia Rates Increase - NOP.SN.195														
General Revenue	0	0.00	0	0.00	0	0.00	0	0.00	356,924	0.00	356,924	0.00	356,924	0.00
Program-Specific	0	0.00	0	0.00	0	0.00	0	0.00	356,924	0.00	356,924	0.00	356,924	0.00
Federal Funds	0	0.00	0	0.00	0	0.00	0	0.00	671,973	0.00	671,973	0.00	671,973	0.00
Program-Specific	0	0.00	0	0.00	0	0.00	0	0.00	671,973	0.00	671,973	0.00	671,973	0.00
Total	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$1,028,897	0.00	\$1,028,897	0.00	\$1,028,897	0.00
FMAP Adjustment - SWO.GV.001														
General Revenue	0	0.00	0	0.00	5,051,266	0.00	5,051,266	0.00	5,051,266	0.00	5,051,266	0.00	5,051,266	0.00
Program-Specific	0	0.00	0	0.00	5,051,266	0.00	5,051,266	0.00	5,051,266	0.00	5,051,266	0.00	5,051,266	0.00
Total	\$0	0.00	\$0	0.00	\$5,051,266	0.00	\$5,051,266	0.00	\$5,051,266	0.00	\$5,051,266	0.00	\$5,051,266	0.00
This funding is requested to compensate for the change in the Federal Medical Assistance Percentage (FMAP). Each year the Centers for Medicare and Medicaid Services (CMS) revises the percentage of Medicaid costs the federal government will reimburse to each state. FMAP varies by state and is based on criteria such as per capita income. Effective October 1, 2025, the blended FMAP rate will decrease from 65.500% to 64.658%. The enhanced FMAP rate for the CHIP children and the Women with Breast or Cervical Cancer program will decrease from 75.853% to 75.263%. This change will result in a net cost shift from Federal to GR funds for the Departments of Mental Health, Health and Senior Services, and Social Services. In order to realign the federal match, the Governor recommended an NDI for additional general revenue authority as well as corresponding core reductions in federal authority.														
The Federal Authority is Social Security Act 1905(b).														
Total - Physician Related Prof	\$580,752,954	0.00	\$609,839,042	0.00	\$592,145,068	0.00	\$583,736,252	0.00	\$584,765,149	0.00	\$584,765,149	0.00	\$584,765,149	0.00

*Does not include Supplementals.

DEPARTMENT OF SOCIAL SERVICES

Section 11.715 cont. – MO HealthNet Division – Certified Community Behavioral Health Organizations (CCBHO)

Book 7, Page 1394

Description: Certified Community Behavioral Health Organizations (CCBHO) is a demonstration program to implement a Prospective Payment System (PPS) for the purchase of behavioral health services for certain Medicaid beneficiaries. The PPS is an actuarially sound, cost-based reimbursement method that replaces the current Medicaid fee-for-service system, which provides reimbursement for individual units of community service provided. Under the demonstration program, community behavioral health organizations recognized by the Department of Mental Health (DMH) as in substantial compliance with new federal standards for Certified Community Behavioral Health Organizations (CCBHOs) receive a single, fixed payment amount for each day that they provide eligible CCBHO services to a Medicaid-eligible individual. As of 7/1/23, Missouri has 20 CCBHOs that are participating in the federal demonstration.

Legal Base: Federal Regulation: 42 CFR, 447.272
Funding Sources: General Revenue (1101) and Title XIX-Federal Fund (1163)
FY 2025 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:
No core changes

GOVERNOR:
Core reduction: (\$13,115,237) FED PSD reduction due to change in the Federal Medical Assistance Percentage (FMAP) rate – see New Decision Item

HOUSE:
Core reduction: (\$90) FED PSD reduction due to change in the Federal Medical Assistance Percentage (FMAP) rate – adjustment to correct the Governor’s reduction to match the FMAP NDI amount

SENATE:
Same as House – no additional core changes

CONFERENCE:
Same as House – no additional core changes

Dept Of Social Services														
	FY25 Budget Amount*	FY25 Budget FTE*	FY26 Department Request	FY26 Department Request FTE	FY26 Governor Recommended as Amended	FY26 Governor Recommended as Amended FTE	FY26 House Recommended	FY26 House Recommended FTE	FY26 Senate Recommended	FY26 Senate Recommended FTE	FY26 Truly Agreed Finally Passed	FY26 Truly Agreed Finally Passed FTE	FY26 TAFP After VETO Action	FY26 TAFP After VETO Action FTE
Section 11.715														
Ccbho - 830212B														
Core														
General Revenue	31,402,602	0.00	31,402,602	0.00	31,402,602	0.00	31,402,602	0.00	31,402,602	0.00	31,402,602	0.00	31,402,602	0.00
Program-Specific	31,402,602	0.00	31,402,602	0.00	31,402,602	0.00	31,402,602	0.00	31,402,602	0.00	31,402,602	0.00	31,402,602	0.00
Federal Funds	80,355,722	0.00	80,355,722	0.00	67,240,485	0.00	67,240,395	0.00	67,240,395	0.00	67,240,395	0.00	67,240,395	0.00
Program-Specific	80,355,722	0.00	80,355,722	0.00	67,240,485	0.00	67,240,395	0.00	67,240,395	0.00	67,240,395	0.00	67,240,395	0.00
Total	\$111,758,324	0.00	\$111,758,324	0.00	\$98,643,087	0.00	\$98,642,997	0.00	\$98,642,997	0.00	\$98,642,997	0.00	\$98,642,997	0.00
ABA Services to CCBHO CTC - NOP.83B.001														
General Revenue	0	0.00	673,192	0.00	1,371,726	0.00	1,371,726	0.00	1,371,726	0.00	1,371,726	0.00	1,371,726	0.00
Program-Specific	0	0.00	673,192	0.00	1,371,726	0.00	1,371,726	0.00	1,371,726	0.00	1,371,726	0.00	1,371,726	0.00
Federal Funds	0	0.00	2,099,426	0.00	4,173,510	0.00	4,173,510	0.00	4,173,510	0.00	4,173,510	0.00	4,173,510	0.00
Program-Specific	0	0.00	2,099,426	0.00	4,173,510	0.00	4,173,510	0.00	4,173,510	0.00	4,173,510	0.00	4,173,510	0.00
Total	\$0	0.00	\$2,772,618	0.00	\$5,545,236	0.00	\$5,545,236	0.00	\$5,545,236	0.00	\$5,545,236	0.00	\$5,545,236	0.00
In SFY 2025, the General Assembly added language to HB Section 11.715 that states, "provided that Applied Behavioral Analysis (ABA) services are included in the CCBHO Prospective Payment System." Due to this added language, the MO HealthNet Division (MHD) is expecting an increase in the rates paid to Certified Community Behavioral Health Organizations (CCBHOs).														
GR Pick Up CCBHO - NOP.83B.003														
General Revenue	0	0.00	15,497,967	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
Program-Specific	0	0.00	15,497,967	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
Total	\$0	0.00	\$15,497,967	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00
Missouri was selected by the federal Centers for Medicare & Medicaid Services (CMS) and Substance Abuse and Mental Health Services Administration (SAMHSA) to participate in a demonstration program to implement a Prospective Payment System (PPS) for the purchase of behavioral health services for certain Medicaid beneficiaries. Under the demonstration program, community behavioral health organizations recognized by the Department of Mental Health (DMH) as in substantial compliance with new federal standards for Certified Community Behavioral Health Organizations (CCBHOs) receive a single, fixed payment amount for each day that they provide eligible CCBHO services to a Medicaid-eligible individual. While under the demonstration period, CCBHOs receive the enhanced federal match rate, which currently, for FFY 2025, is 75.72%. The demonstration period for CCBHOs is set to expire on September 30, 2025. Upon expiration of the demonstration, the federal match will revert to the standard federal match rate, which currently, for FFY 2025, is 65.31%. A GR Pickup will be needed to cover the difference in these federal match rates.														
MO HealthNet Cost to Continue - NOP.83B.032														
General Revenue	0	0.00	28,382,687	0.00	29,290,829	0.00	29,290,829	0.00	29,290,829	0.00	29,290,829	0.00	29,290,829	0.00
Program-Specific	0	0.00	28,382,687	0.00	29,290,829	0.00	29,290,829	0.00	29,290,829	0.00	29,290,829	0.00	29,290,829	0.00
Federal Funds	0	0.00	69,949,253	0.00	69,041,111	0.00	69,041,111	0.00	69,041,111	0.00	69,041,111	0.00	69,041,111	0.00
Program-Specific	0	0.00	69,949,253	0.00	69,041,111	0.00	69,041,111	0.00	69,041,111	0.00	69,041,111	0.00	69,041,111	0.00
Total	\$0	0.00	\$98,331,940	0.00	\$98,331,940	0.00	\$98,331,940	0.00	\$98,331,940	0.00	\$98,331,940	0.00	\$98,331,940	0.00
Funds are requested for estimated costs in the FY 2025 budget. These amounts are based on actual MO HealthNet program expenditures through November 2024 and historical trends. It is anticipated that additional funding will be necessary to operate current MO HealthNet programs for Fiscal Year 2026. Programs with estimated shortfalls are listed below.														
FMAP Adjustment - SWO.GV.001														
General Revenue	0	0.00	0	0.00	13,115,327	0.00	13,115,327	0.00	13,115,327	0.00	13,115,327	0.00	13,115,327	0.00
Program-Specific	0	0.00	0	0.00	13,115,327	0.00	13,115,327	0.00	13,115,327	0.00	13,115,327	0.00	13,115,327	0.00
Total	\$0	0.00	\$0	0.00	\$13,115,327	0.00	\$13,115,327	0.00	\$13,115,327	0.00	\$13,115,327	0.00	\$13,115,327	0.00

*Does not include Supplementals.

Dept Of Social Services															
	FY25 Budget Amount*	FY25 Budget FTE*	FY26 Department Request	FY26 Department Request FTE	FY26 Governor Recommended as Amended	FY26 Governor Recommended as Amended FTE	FY26 House Recommended	FY26 House Recommended FTE	FY26 Senate Recommended	FY26 Senate Recommended FTE	FY26 Truly Agreed Finally Passed	FY26 Truly Agreed Finally Passed FTE	FY26 TAFP After VETO Action	FY26 TAFP After VETO Action FTE	
This funding is requested to compensate for the change in the Federal Medical Assistance Percentage (FMAP). Each year the Centers for Medicare and Medicaid Services (CMS) revises the percentage of Medicaid costs the federal government will reimburse to each state. FMAP varies by state and is based on criteria such as per capita income. Effective October 1, 2025, the blended FMAP rate will decrease from 65.500% to 64.658%. The enhanced FMAP rate for the CHIP children and the Women with Breast or Cervical Cancer program will decrease from 75.853% to 75.263%. This change will result in a net cost shift from Federal to GR funds for the Departments of Mental Health, Health and Senior Services, and Social Services. In order to realign the federal match, the Governor recommended an NDI for additional general revenue authority as well as corresponding core reductions in federal authority.															
The Federal Authority is Social Security Act 1905(b).															
Total - Ccbho	\$111,758,324	0.00	\$228,360,849	0.00	\$215,635,590	0.00	\$215,635,500	0.00	\$215,635,500	0.00	\$215,635,500	0.00	\$215,635,500	0.00	

*Does not include Supplementals.

DEPARTMENT OF SOCIAL SERVICES

Section 11.720 – MO HealthNet Division – Programs for All-Inclusive Care for the Elderly (PACE)

Book 7, Page 1408

Description: This item funds payments provided to the Program for All-Inclusive Care for the Elderly (PACE). PACE provides a full range of preventive, primary, acute, in-home, and long-term care services. PACE is able to provide services to participants 24 hours a day, 7 days a week and services are provided as deemed necessary via a health assessment by the PACE Interdisciplinary Team (IDT). All medical services authorized and delivered to the participant while enrolled in the PACE program are the financial responsibility of the PACE provider. Missouri currently has of three operating PACE organizations (PO), New Horizons PACE in the St. Louis area, PACE KC Adult Wellness Center in Jackson County, and Jordan Valley Senior Care in Springfield.

Legal Base: State Regulation: 13 CSR 70-8.010; Federal Regulation: 42 CFR, 460
Funding Sources: General Revenue (1101) and Title XIX-Federal Fund (1163)
FY 2025 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

No core changes

GOVERNOR:

Core reduction: (\$75,312) FED PSD reduction due to change in the Federal Medical Assistance Percentage (FMAP) rate – see New Decision Item

HOUSE:

Core reduction: (\$339,539) (GR \$120,000 and FED \$219,539 PSD) reduction

SENATE:

Same as House – no additional core changes

CONFERENCE:

Same as House – no additional core changes

Dept Of Social Services														
	FY25 Budget Amount*	FY25 Budget FTE*	FY26 Department Request	FY26 Department Request FTE	FY26 Governor Recommended as Amended	FY26 Governor Recommended as Amended FTE	FY26 House Recommended	FY26 House Recommended FTE	FY26 Senate Recommended	FY26 Senate Recommended FTE	FY26 Truly Agreed Finally Passed	FY26 Truly Agreed Finally Passed FTE	FY26 TAFP After VETO Action	FY26 TAFP After VETO Action FTE
Section 11.720														
Pace - 830207B														
Core														
General Revenue	4,530,183	0.00	4,530,183	0.00	4,530,183	0.00	4,410,183	0.00	4,410,183	0.00	4,410,183	0.00	4,410,183	0.00
Program-Specific	4,530,183	0.00	4,530,183	0.00	4,530,183	0.00	4,410,183	0.00	4,410,183	0.00	4,410,183	0.00	4,410,183	0.00
Federal Funds	8,500,855	0.00	8,500,855	0.00	8,425,543	0.00	8,206,004	0.00	8,206,004	0.00	8,206,004	0.00	8,206,004	0.00
Program-Specific	8,500,855	0.00	8,500,855	0.00	8,425,543	0.00	8,206,004	0.00	8,206,004	0.00	8,206,004	0.00	8,206,004	0.00
Total	\$13,031,038	0.00	\$13,031,038	0.00	\$12,955,726	0.00	\$12,616,187	0.00	\$12,616,187	0.00	\$12,616,187	0.00	\$12,616,187	0.00
PACE Rate Increase - NOP.83B.019														
General Revenue	0	0.00	143,516	0.00	146,213	0.00	146,213	0.00	146,213	0.00	146,213	0.00	146,213	0.00
Program-Specific	0	0.00	143,516	0.00	146,213	0.00	146,213	0.00	146,213	0.00	146,213	0.00	146,213	0.00
Federal Funds	0	0.00	270,193	0.00	267,496	0.00	267,496	0.00	267,496	0.00	267,496	0.00	267,496	0.00
Program-Specific	0	0.00	270,193	0.00	267,496	0.00	267,496	0.00	267,496	0.00	267,496	0.00	267,496	0.00
Total	\$0	0.00	\$413,709	0.00	\$413,709	0.00	\$413,709	0.00	\$413,709	0.00	\$413,709	0.00	\$413,709	0.00
PACE rates are based on the calendar year and new rates begin in January. The number of participants are based on the projected number for the same time period in FY 25. The projected rate increases are based on a 5% increase. These rate estimates include a 5% discount from what the State of Missouri would have otherwise paid for this population. The federal matching rate used for the Governor's Recommended is the FY26 Blended FMAP of 64.658% for the program.														
MO HealthNet Cost to Continue - NOP.83B.032														
General Revenue	0	0.00	1,441,896	0.00	1,523,603	0.00	1,523,603	0.00	1,523,603	0.00	1,523,603	0.00	1,523,603	0.00
Program-Specific	0	0.00	1,441,896	0.00	1,523,603	0.00	1,523,603	0.00	1,523,603	0.00	1,523,603	0.00	1,523,603	0.00
Federal Funds	0	0.00	2,486,764	0.00	2,302,700	0.00	2,302,700	0.00	2,302,700	0.00	2,302,700	0.00	2,302,700	0.00
Program-Specific	0	0.00	2,486,764	0.00	2,302,700	0.00	2,302,700	0.00	2,302,700	0.00	2,302,700	0.00	2,302,700	0.00
Total	\$0	0.00	\$3,928,660	0.00	\$3,826,303	0.00	\$3,826,303	0.00	\$3,826,303	0.00	\$3,826,303	0.00	\$3,826,303	0.00
Funds are requested for estimated costs in the FY 2025 budget. These amounts are based on actual MO HealthNet program expenditures through November 2024 and historical trends. It is anticipated that additional funding will be necessary to operate current MO HealthNet programs for Fiscal Year 2026. Programs with estimated shortfalls are listed below.														
FMAP Adjustment - SWO.GV.001														
General Revenue	0	0.00	0	0.00	75,312	0.00	75,312	0.00	75,312	0.00	75,312	0.00	75,312	0.00
Program-Specific	0	0.00	0	0.00	75,312	0.00	75,312	0.00	75,312	0.00	75,312	0.00	75,312	0.00
Total	\$0	0.00	\$0	0.00	\$75,312	0.00	\$75,312	0.00	\$75,312	0.00	\$75,312	0.00	\$75,312	0.00
This funding is requested to compensate for the change in the Federal Medical Assistance Percentage (FMAP). Each year the Centers for Medicare and Medicaid Services (CMS) revises the percentage of Medicaid costs the federal government will reimburse to each state. FMAP varies by state and is based on criteria such as per capita income. Effective October 1, 2025, the blended FMAP rate will decrease from 65.500% to 64.658%. The enhanced FMAP rate for the CHIP children and the Women with Breast or Cervical Cancer program will decrease from 75.853% to 75.263%. This change will result in a net cost shift from Federal to GR funds for the Departments of Mental Health, Health and Senior Services, and Social Services. In order to realign the federal match, the Governor recommended an NDI for additional general revenue authority as well as corresponding core reductions in federal authority.														
The Federal Authority is Social Security Act 1905(b).														
Total - Pace	\$13,031,038	0.00	\$17,373,407	0.00	\$17,271,050	0.00	\$16,931,511	0.00	\$16,931,511	0.00	\$16,931,511	0.00	\$16,931,511	0.00

*Does not include Supplementals.

DEPARTMENT OF SOCIAL SERVICES
Section 11.725 – MO HealthNet Divisions – Dental Services

Book 7, Page 1419

Description: This budget item funds the dental fee-for-service program. Comprehensive dental services are available for children, pregnant women, the blind and nursing facility residents (including Independent Care Facilities for individuals with Intellectual Disabilities-ICF/ID). As of January 2016, MO HealthNet began offering limited dental services for adults ages 21 and over.

Legal Base: State Statute: Section 208.152, RSMo.; Federal Law: Social Security Act Section 1905(a) (12) and (18), 1905(o); Federal Regulation: 42 CFR 410.40, 418, 431.53, 440.60, 440.120, 440.130 and 440.170

Fund Sources: General Revenue (1101), Title XIX-Federal Fund (1163), and Health Initiatives Fund (1275)

FY 2025 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

No core changes

GOVERNOR:

Core reduction: (\$83,548) GR PSD reduction due to change in the Federal Medical Assistance Percentage (FMAP) rate – see New Decision Item

HOUSE:

Same as Governor – no additional core changes

SENATE:

Same as Governor – no additional core changes

CONFERENCE:

Same as Governor – no additional core changes

Dept Of Social Services														
	FY25 Budget Amount*	FY25 Budget FTE*	FY26 Department Request	FY26 Department Request FTE	FY26 Governor Recommended as Amended	FY26 Governor Recommended as Amended FTE	FY26 House Recommended	FY26 House Recommended FTE	FY26 Senate Recommended	FY26 Senate Recommended FTE	FY26 Truly Agreed Finally Passed	FY26 Truly Agreed Finally Passed FTE	FY26 TAFP After VETO Action	FY26 TAFP After VETO Action FTE
Section 11.725														
Dental - 830214B														
Core														
General Revenue	4,760,092	0.00	4,760,092	0.00	4,676,544	0.00	4,676,544	0.00	4,676,544	0.00	4,676,544	0.00	4,676,544	0.00
Program-Specific	4,760,092	0.00	4,760,092	0.00	4,676,544	0.00	4,676,544	0.00	4,676,544	0.00	4,676,544	0.00	4,676,544	0.00
Federal Funds	8,602,164	0.00	8,602,164	0.00	8,602,164	0.00	8,602,164	0.00	8,602,164	0.00	8,602,164	0.00	8,602,164	0.00
Program-Specific	8,602,164	0.00	8,602,164	0.00	8,602,164	0.00	8,602,164	0.00	8,602,164	0.00	8,602,164	0.00	8,602,164	0.00
Other Funds	71,162	0.00	71,162	0.00	71,162	0.00	71,162	0.00	71,162	0.00	71,162	0.00	71,162	0.00
Program-Specific	71,162	0.00	71,162	0.00	71,162	0.00	71,162	0.00	71,162	0.00	71,162	0.00	71,162	0.00
Total	\$13,433,418	0.00	\$13,433,418	0.00	\$13,349,870	0.00	\$13,349,870	0.00	\$13,349,870	0.00	\$13,349,870	0.00	\$13,349,870	0.00
MO HealthNet Cost to Continue - NOP.83B.032														
General Revenue	0	0.00	641,239	0.00	626,101	0.00	118,686	0.00	118,686	0.00	118,686	0.00	118,686	0.00
Program-Specific	0	0.00	641,239	0.00	626,101	0.00	118,686	0.00	118,686	0.00	118,686	0.00	118,686	0.00
Federal Funds	0	0.00	1,700,763	0.00	1,359,069	0.00	439,888	0.00	439,888	0.00	439,888	0.00	439,888	0.00
Program-Specific	0	0.00	1,700,763	0.00	1,359,069	0.00	439,888	0.00	439,888	0.00	439,888	0.00	439,888	0.00
Total	\$0	0.00	\$2,342,002	0.00	\$1,985,170	0.00	\$558,574	0.00	\$558,574	0.00	\$558,574	0.00	\$558,574	0.00
Funds are requested for estimated costs in the FY 2025 budget. These amounts are based on actual MO HealthNet program expenditures through November 2024 and historical trends. It is anticipated that additional funding will be necessary to operate current MO HealthNet programs for Fiscal Year 2026. Programs with estimated shortfalls are listed below.														
FMAP Adjustment - SWO.GV.001														
Federal Funds	0	0.00	0	0.00	83,548	0.00	83,548	0.00	83,548	0.00	83,548	0.00	83,548	0.00
Program-Specific	0	0.00	0	0.00	83,548	0.00	83,548	0.00	83,548	0.00	83,548	0.00	83,548	0.00
Total	\$0	0.00	\$0	0.00	\$83,548	0.00	\$83,548	0.00	\$83,548	0.00	\$83,548	0.00	\$83,548	0.00
This funding is requested to compensate for the change in the Federal Medical Assistance Percentage (FMAP). Each year the Centers for Medicare and Medicaid Services (CMS) revises the percentage of Medicaid costs the federal government will reimburse to each state. FMAP varies by state and is based on criteria such as per capita income. Effective October 1, 2025, the blended FMAP rate will decrease from 65.500% to 64.658%. The enhanced FMAP rate for the CHIP children and the Women with Breast or Cervical Cancer program will decrease from 75.853% to 75.263%. This change will result in a net cost shift from Federal to GR funds for the Departments of Mental Health, Health and Senior Services, and Social Services. In order to realign the federal match, the Governor recommended an NDI for additional general revenue authority as well as corresponding core reductions in federal authority.														
The Federal Authority is Social Security Act 1905(b).														
Total - Dental	\$13,433,418	0.00	\$15,775,420	0.00	\$15,418,588	0.00	\$13,991,992	0.00	\$13,991,992	0.00	\$13,991,992	0.00	\$13,991,992	0.00

*Does not include Supplementals.

DEPARTMENT OF SOCIAL SERVICES

Section 11.730 – MO HealthNet Division – Premium Payments

Book 7, Page 1426

Description: This item funds premium payments for health insurance through the following MO HealthNet programs: (1) Medicare Buy-In program for individuals dually enrolled in MO HealthNet and Medicare; (2) Health Insurance Premium Payment (HIPP) program for individuals enrolled in MO HealthNet and commercial or employer-sponsored health insurance. Payment of these premiums allows MO HealthNet to transfer medical costs from the MO HealthNet program to Medicare and other payers. The purpose of the Medicare Savings Program and the Health Insurance Premium Payment (HIPP) Program is to allow states to enroll certain groups of eligible individuals in Medicare or private insurance and pay their monthly premiums to transfer medical costs from the Title XIX Medicaid program to the Medicare program - Title XVIII or other payers. This process allows the state to realize cost savings through substitution of Medicare or other payer liability for the majority of the medical costs before a provider may seek reimbursement for the remaining uncompensated portion of the services.

Legal Base: State Statute: Section 208.153, RSMo.; Federal Law: Social Security Act Section 1905(p) (1), 1902(a) (10) and 1906; Federal Regulation: 42 CFR 406.26 and 431.625
Funding Sources: General Revenue (1101) and Title XIX-Federal Fund (1163)
FY 2025 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

Core reduction: (\$33,124,324) (GR \$8,076,949 and FED \$25,047,375 PSD) reduction due to estimated lapse

GOVERNOR:

Core reduction: (\$1,874,648) FED PSD reduction due to change in the Federal Medical Assistance Percentage (FMAP) rate – see New Decision Item

HOUSE:

Core reduction: (\$8,139,638) FED PSD reduction based on January end-of-month (EOM) projections
Core restoration: \$1,390,829 GR PSD restoration based on January end-of-month (EOM) projections – reversed a portion of Department’s change

SENATE:

Same as House – no additional core changes

CONFERENCE:

Same as House – no additional core changes

Dept Of Social Services														
	FY25 Budget Amount*	FY25 Budget FTE*	FY26 Department Request	FY26 Department Request FTE	FY26 Governor Recommended as Amended	FY26 Governor Recommended as Amended FTE	FY26 House Recommended	FY26 House Recommended FTE	FY26 Senate Recommended	FY26 Senate Recommended FTE	FY26 Truly Agreed Finally Passed	FY26 Truly Agreed Finally Passed FTE	FY26 TAFP After VETO Action	FY26 TAFP After VETO Action FTE
Section 11.730														
Premium Payments - 830215B														
Core														
General Revenue	125,531,257	0.00	117,454,308	0.00	117,454,308	0.00	118,845,137	0.00	118,845,137	0.00	118,845,137	0.00	118,845,137	0.00
Program-Specific	125,531,257	0.00	117,454,308	0.00	117,454,308	0.00	118,845,137	0.00	118,845,137	0.00	118,845,137	0.00	118,845,137	0.00
Federal Funds	267,726,812	0.00	242,679,437	0.00	240,804,789	0.00	232,665,151	0.00	232,665,151	0.00	232,665,151	0.00	232,665,151	0.00
Program-Specific	267,726,812	0.00	242,679,437	0.00	240,804,789	0.00	232,665,151	0.00	232,665,151	0.00	232,665,151	0.00	232,665,151	0.00
Total	\$393,258,069	0.00	\$360,133,745	0.00	\$358,259,097	0.00	\$351,510,288	0.00	\$351,510,288	0.00	\$351,510,288	0.00	\$351,510,288	0.00
Premium Increase - NOP.83B.025														
General Revenue	0	0.00	12,279,219	0.00	9,515,432	0.00	9,515,432	0.00	9,515,432	0.00	9,515,432	0.00	9,515,432	0.00
Program-Specific	0	0.00	12,279,219	0.00	9,515,432	0.00	9,515,432	0.00	9,515,432	0.00	9,515,432	0.00	9,515,432	0.00
Federal Funds	0	0.00	25,497,141	0.00	19,210,798	0.00	19,210,798	0.00	19,210,798	0.00	19,210,798	0.00	19,210,798	0.00
Program-Specific	0	0.00	25,497,141	0.00	19,210,798	0.00	19,210,798	0.00	19,210,798	0.00	19,210,798	0.00	19,210,798	0.00
Total	\$0	0.00	\$37,776,360	0.00	\$28,726,230	0.00	\$28,726,230	0.00	\$28,726,230	0.00	\$28,726,230	0.00	\$28,726,230	0.00
Medicare Part A and Part B premiums are adjusted each January by the federal government. Current premium rates (effective January 2024) are \$505 per month for Part A and \$174.70 per month for Part B. Beginning January 2025, Part A rates are increasing by \$13 (\$518 per month), while Part B rates are increasing by \$10.30 (\$185 per month). Beginning January 2026, Part A rates are assumed to increase another \$10 (\$528 per month), while Part B premium rates are assumed to increase another \$20 (\$205 per month). This request is for the last six months of funding for the calendar year 2025 premium, and the first six months of funding for the expected premium increase for calendar year 2026.														
The Federal Authority is Social Security Act Section 1905(p)(1), 1902(a)(10), and 1906 and Federal Regulations 42 CFR 406.26 and 431.625. The State Authority is Section 208.153, RSMo.														
FMAP Adjustment - SWO.GV.001														
General Revenue	0	0.00	0	0.00	1,874,648	0.00	1,874,648	0.00	1,874,648	0.00	1,874,648	0.00	1,874,648	0.00
Program-Specific	0	0.00	0	0.00	1,874,648	0.00	1,874,648	0.00	1,874,648	0.00	1,874,648	0.00	1,874,648	0.00
Total	\$0	0.00	\$0	0.00	\$1,874,648	0.00	\$1,874,648	0.00	\$1,874,648	0.00	\$1,874,648	0.00	\$1,874,648	0.00
This funding is requested to compensate for the change in the Federal Medical Assistance Percentage (FMAP). Each year the Centers for Medicare and Medicaid Services (CMS) revises the percentage of Medicaid costs the federal government will reimburse to each state. FMAP varies by state and is based on criteria such as per capita income. Effective October 1, 2025, the blended FMAP rate will decrease from 65.500% to 64.658%. The enhanced FMAP rate for the CHIP children and the Women with Breast or Cervical Cancer program will decrease from 75.853% to 75.263%. This change will result in a net cost shift from Federal to GR funds for the Departments of Mental Health, Health and Senior Services, and Social Services. In order to realign the federal match, the Governor recommended an NDI for additional general revenue authority as well as corresponding core reductions in federal authority.														
The Federal Authority is Social Security Act 1905(b).														
Total - Premium Payments	\$393,258,069	0.00	\$397,910,105	0.00	\$388,859,975	0.00	\$382,111,166	0.00	\$382,111,166	0.00	\$382,111,166	0.00	\$382,111,166	0.00

*Does not include Supplementals.

DEPARTMENT OF SOCIAL SERVICES

Section 11.735 – MO HealthNet Division – Nursing Facilities

Book 7, Page 1437

Description: This core is for on-going funding of payments for nursing facility services provided to MO HealthNet participants. Providers are reimbursed for MO HealthNet participants based on the participants' days of care multiplied by the facility's Title XIX per diem rate less any patient surplus (i.e., funds contributed by the participant). A per diem rate is established for each nursing facility by the Institutional Reimbursement Unit (IRU) of the MO HealthNet Division (MHD) utilizing a prospective reimbursement system. A prospective rate is established on a particular cost report year and may be adjusted in subsequent years for various items, such as acuity adjustments, quality measures, or global per diem adjustments granted to the industry as a whole. Rates may be recalculated on a more recent cost report year, which is referred to as rebasing. Nursing facility reimbursement was transformed in FY 2023 by rebasing nursing facility rates and modifying the reimbursement methodology.

Legal Base: State Statute: Sections 208.153, 208.159, 208.201, and 660.017, RSMo.; Federal Law: Social Security Act Section 1905(a) (4). Federal Regulation: 42 CFR 440.40 and 440.210

Funding Sources: General Revenue (1101), Title XIX-Federal Fund (1163), Uncompensated Care Fund (1108), and Third Party Liability Collections Fund (1120)

FY 2025 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

No core changes

GOVERNOR:

Core reduction: (\$2,039,426) FED PSD reduction due to change in the Federal Medical Assistance Percentage (FMAP) rate – see New Decision Item

HOUSE:

Same as Governor – no additional core changes

SENATE:

Same as Governor – no additional core changes

CONFERENCE:

Same as Governor – no additional core changes

Dept Of Social Services														
	FY25 Budget Amount*	FY25 Budget FTE*	FY26 Department Request	FY26 Department Request FTE	FY26 Governor Recommended as Amended	FY26 Governor Recommended as Amended FTE	FY26 House Recommended	FY26 House Recommended FTE	FY26 Senate Recommended	FY26 Senate Recommended FTE	FY26 Truly Agreed Finally Passed	FY26 Truly Agreed Finally Passed FTE	FY26 TAFP After VETO Action	FY26 TAFP After VETO Action FTE
Section 11.735														
Nursing Facilities - 830216B														
Core														
General Revenue	293,637,220	0.00	293,637,220	0.00	293,637,220	0.00	293,637,220	0.00	293,637,220	0.00	293,637,220	0.00	293,637,220	0.00
Program-Specific	293,637,220	0.00	293,637,220	0.00	293,637,220	0.00	293,637,220	0.00	293,637,220	0.00	293,637,220	0.00	293,637,220	0.00
Federal Funds	662,813,015	0.00	662,813,015	0.00	660,773,589	0.00	660,773,589	0.00	660,773,589	0.00	660,773,589	0.00	660,773,589	0.00
Program-Specific	662,813,015	0.00	662,813,015	0.00	660,773,589	0.00	660,773,589	0.00	660,773,589	0.00	660,773,589	0.00	660,773,589	0.00
Other Funds	65,509,459	0.00	65,509,459	0.00	65,509,459	0.00	65,509,459	0.00	65,509,459	0.00	65,509,459	0.00	65,509,459	0.00
Program-Specific	65,509,459	0.00	65,509,459	0.00	65,509,459	0.00	65,509,459	0.00	65,509,459	0.00	65,509,459	0.00	65,509,459	0.00
Total	\$1,021,959,694	0.00	\$1,021,959,694	0.00	\$1,019,920,268	0.00	\$1,019,920,268	0.00	\$1,019,920,268	0.00	\$1,019,920,268	0.00	\$1,019,920,268	0.00
MO HealthNet Cost to Continue - NOP.83B.032														
General Revenue	0	0.00	41,192,655	0.00	50,524,382	0.00	41,116,473	0.00	50,524,382	0.00	41,116,473	0.00	41,116,473	0.00
Program-Specific	0	0.00	41,192,655	0.00	50,524,382	0.00	41,116,473	0.00	50,524,382	0.00	41,116,473	0.00	41,116,473	0.00
Federal Funds	0	0.00	90,895,891	0.00	85,026,783	0.00	67,978,255	0.00	67,978,255	0.00	67,978,255	0.00	67,978,255	0.00
Program-Specific	0	0.00	90,895,891	0.00	85,026,783	0.00	67,978,255	0.00	67,978,255	0.00	67,978,255	0.00	67,978,255	0.00
Total	\$0	0.00	\$132,088,546	0.00	\$135,551,165	0.00	\$109,094,728	0.00	\$118,502,637	0.00	\$109,094,728	0.00	\$109,094,728	0.00
Funds are requested for estimated costs in the FY 2025 budget. These amounts are based on actual MO HealthNet program expenditures through November 2024 and historical trends. It is anticipated that additional funding will be necessary to operate current MO HealthNet programs for Fiscal Year 2026. Programs with estimated shortfalls are listed below.														
FMAP Adjustment - SWO.GV.001														
General Revenue	0	0.00	0	0.00	2,039,426	0.00	2,039,426	0.00	2,039,426	0.00	2,039,426	0.00	2,039,426	0.00
Program-Specific	0	0.00	0	0.00	2,039,426	0.00	2,039,426	0.00	2,039,426	0.00	2,039,426	0.00	2,039,426	0.00
Total	\$0	0.00	\$0	0.00	\$2,039,426	0.00	\$2,039,426	0.00	\$2,039,426	0.00	\$2,039,426	0.00	\$2,039,426	0.00
This funding is requested to compensate for the change in the Federal Medical Assistance Percentage (FMAP). Each year the Centers for Medicare and Medicaid Services (CMS) revises the percentage of Medicaid costs the federal government will reimburse to each state. FMAP varies by state and is based on criteria such as per capita income. Effective October 1, 2025, the blended FMAP rate will decrease from 65.500% to 64.658%. The enhanced FMAP rate for the CHIP children and the Women with Breast or Cervical Cancer program will decrease from 75.853% to 75.263%. This change will result in a net cost shift from Federal to GR funds for the Departments of Mental Health, Health and Senior Services, and Social Services. In order to realign the federal match, the Governor recommended an NDI for additional general revenue authority as well as corresponding core reductions in federal authority.														
The Federal Authority is Social Security Act 1905(b).														
Total - Nursing Facilities	\$1,021,959,694	0.00	\$1,154,048,240	0.00	\$1,157,510,859	0.00	\$1,131,054,422	0.00	\$1,140,462,331	0.00	\$1,131,054,422	0.00	\$1,131,054,422	0.00

DEPARTMENT OF SOCIAL SERVICES

Section 11.735 cont. – MO HealthNet Division – Nursing Facility Value Based Payments

Book 7, Page 1445

Description: This is for the rebasing of nursing facility rates. This section provides funding that provides value based incentive payments to nursing facilities.

Legal Base: State Statute: Sections 208.153, 208.159, 208.201, and 660.017, RSMo.; Federal Law: Social Security Act Section 1905(a) (4). Federal Regulation: 42 CFR 440.40 and 440.210

Funding Sources: General Revenue (1101) and Title XIX-Federal Fund (1163)

FY 2025 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

No core changes

GOVERNOR:

Core reduction: (\$266,730) FED PSD reduction due to change in the Federal Medical Assistance Percentage (FMAP) rate – see New Decision Item

HOUSE:

Same as Governor – no additional core changes

SENATE:

Same as Governor – no additional core changes

CONFERENCE:

Same as Governor – no additional core changes

Dept Of Social Services														
	FY25 Budget Amount*	FY25 Budget FTE*	FY26 Department Request	FY26 Department Request FTE	FY26 Governor Recommended as Amended	FY26 Governor Recommended as Amended FTE	FY26 House Recommended	FY26 House Recommended FTE	FY26 Senate Recommended	FY26 Senate Recommended FTE	FY26 Truly Agreed Finally Passed	FY26 Truly Agreed Finally Passed FTE	FY26 TAFP After VETO Action	FY26 TAFP After VETO Action FTE
Section 11.735														
Nf Value Based Payments - 830217B														
Core														
General Revenue	10,922,480	0.00	10,922,480	0.00	10,922,480	0.00	10,922,480	0.00	10,922,480	0.00	10,922,480	0.00	10,922,480	0.00
Program-Specific	10,922,480	0.00	10,922,480	0.00	10,922,480	0.00	10,922,480	0.00	10,922,480	0.00	10,922,480	0.00	10,922,480	0.00
Federal Funds	20,736,882	0.00	20,736,882	0.00	20,470,152	0.00	20,470,152	0.00	20,470,152	0.00	20,470,152	0.00	20,470,152	0.00
Program-Specific	20,736,882	0.00	20,736,882	0.00	20,470,152	0.00	20,470,152	0.00	20,470,152	0.00	20,470,152	0.00	20,470,152	0.00
Total	\$31,659,362	0.00	\$31,659,362	0.00	\$31,392,632	0.00	\$31,392,632	0.00	\$31,392,632	0.00	\$31,392,632	0.00	\$31,392,632	0.00
Nursing Facilities VBP Rebase - NOP.GV.117														
General Revenue	0	0.00	0	0.00	1,081,926	0.00	1,081,926	0.00	1,081,926	0.00	1,081,926	0.00	1,081,926	0.00
Program-Specific	0	0.00	0	0.00	1,081,926	0.00	1,081,926	0.00	1,081,926	0.00	1,081,926	0.00	1,081,926	0.00
Federal Funds	0	0.00	0	0.00	2,036,915	0.00	2,036,915	0.00	2,036,915	0.00	2,036,915	0.00	2,036,915	0.00
Program-Specific	0	0.00	0	0.00	2,036,915	0.00	2,036,915	0.00	2,036,915	0.00	2,036,915	0.00	2,036,915	0.00
Total	\$0	0.00	\$0	0.00	\$3,118,841	0.00	\$3,118,841	0.00	\$3,118,841	0.00	\$3,118,841	0.00	\$3,118,841	0.00
This New Decision Item provides funding for increased Value-Based incentive Payments (VBP) to Nursing Facilities. These payments are provided to Nursing Facilities when certain healthcare-related quality measures are achieved. They are intended to improve health outcomes for our most vulnerable Medicaid participants. This funding is needed to maintain the VBP at the same percentage as historical rate increases, which is approximately eight percent of the most recent rebase.														
FMAP Adjustment - SWO.GV.001														
General Revenue	0	0.00	0	0.00	266,730	0.00	266,730	0.00	266,730	0.00	266,730	0.00	266,730	0.00
Program-Specific	0	0.00	0	0.00	266,730	0.00	266,730	0.00	266,730	0.00	266,730	0.00	266,730	0.00
Total	\$0	0.00	\$0	0.00	\$266,730	0.00	\$266,730	0.00	\$266,730	0.00	\$266,730	0.00	\$266,730	0.00
This funding is requested to compensate for the change in the Federal Medical Assistance Percentage (FMAP). Each year the Centers for Medicare and Medicaid Services (CMS) revises the percentage of Medicaid costs the federal government will reimburse to each state. FMAP varies by state and is based on criteria such as per capita income. Effective October 1, 2025, the blended FMAP rate will decrease from 65.500% to 64.658%. The enhanced FMAP rate for the CHIP children and the Women with Breast or Cervical Cancer program will decrease from 75.853% to 75.263%. This change will result in a net cost shift from Federal to GR funds for the Departments of Mental Health, Health and Senior Services, and Social Services. In order to realign the federal match, the Governor recommended an NDI for additional general revenue authority as well as corresponding core reductions in federal authority.														
The Federal Authority is Social Security Act 1905(b).														
Total - Nf Value Based Payments	\$31,659,362	0.00	\$31,659,362	0.00	\$34,778,203	0.00	\$34,778,203	0.00	\$34,778,203	0.00	\$34,778,203	0.00	\$34,778,203	0.00

*Does not include Supplementals.

DEPARTMENT OF SOCIAL SERVICES

Section 11.735 cont. – MO HealthNet Division – Home Health

Book 7, Page 1453

Description: This item funds payments for services provided through the Home Health program for the fee-for-service MO HealthNet population. This program is designed to help MO HealthNet participants remain in their home instead of seeking institutional care through the provision of clinical (or “skilled”) medical services. Home Health services are also available through the MO HealthNet Managed Care health plans.

Legal Base: State Statute: Section 208.152 RSMo.; Federal Regulation: 42 CFR 440.70 and 440.210; Social Security Act Sections: 1905(a) (7)

Fund Sources: General Revenue (1101), Title XIX-Federal Fund (1163), and Health Initiatives Fund (1275)

FY 2025 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

Core reduction: (\$164,357) (GR \$73,598 and FED \$90,759 PSD) reduction due to estimated lapse

GOVERNOR:

Core reduction: (\$25,983) FED PSD reduction due to change in the Federal Medical Assistance Percentage (FMAP) rate – see New Decision Item

HOUSE:

Core reduction: (\$832,217) (GR \$147,027 and FED \$685,190 PSD) reduction based on January end-of-month (EOM) projections

SENATE:

Same as House – no additional core changes

CONFERENCE:

Same as House – no additional core changes

Dept Of Social Services														
	FY25 Budget Amount*	FY25 Budget FTE*	FY26 Department Request	FY26 Department Request FTE	FY26 Governor Recommended as Amended	FY26 Governor Recommended as Amended FTE	FY26 House Recommended	FY26 House Recommended FTE	FY26 Senate Recommended	FY26 Senate Recommended FTE	FY26 Truly Agreed Finally Passed	FY26 Truly Agreed Finally Passed FTE	FY26 TAFP After VETO Action	FY26 TAFP After VETO Action FTE
Section 11.735														
Home Health - 830218B														
Core														
General Revenue	1,295,661	0.00	1,222,063	0.00	1,222,063	0.00	1,075,036	0.00	1,075,036	0.00	1,075,036	0.00	1,075,036	0.00
Program-Specific	1,295,661	0.00	1,222,063	0.00	1,222,063	0.00	1,075,036	0.00	1,075,036	0.00	1,075,036	0.00	1,075,036	0.00
Federal Funds	2,691,427	0.00	2,600,668	0.00	2,574,685	0.00	1,889,495	0.00	1,889,495	0.00	1,889,495	0.00	1,889,495	0.00
Program-Specific	2,691,427	0.00	2,600,668	0.00	2,574,685	0.00	1,889,495	0.00	1,889,495	0.00	1,889,495	0.00	1,889,495	0.00
Other Funds	159,305	0.00	159,305	0.00	159,305	0.00	159,305	0.00	159,305	0.00	159,305	0.00	159,305	0.00
Program-Specific	159,305	0.00	159,305	0.00	159,305	0.00	159,305	0.00	159,305	0.00	159,305	0.00	159,305	0.00
Total	\$4,146,393	0.00	\$3,982,036	0.00	\$3,956,053	0.00	\$3,123,836	0.00	\$3,123,836	0.00	\$3,123,836	0.00	\$3,123,836	0.00
FMAP Adjustment - SWO.GV.001														
General Revenue	0	0.00	0	0.00	25,983	0.00	25,983	0.00	25,983	0.00	25,983	0.00	25,983	0.00
Program-Specific	0	0.00	0	0.00	25,983	0.00	25,983	0.00	25,983	0.00	25,983	0.00	25,983	0.00
Total	\$0	0.00	\$0	0.00	\$25,983	0.00	\$25,983	0.00	\$25,983	0.00	\$25,983	0.00	\$25,983	0.00
This funding is requested to compensate for the change in the Federal Medical Assistance Percentage (FMAP). Each year the Centers for Medicare and Medicaid Services (CMS) revises the percentage of Medicaid costs the federal government will reimburse to each state. FMAP varies by state and is based on criteria such as per capita income. Effective October 1, 2025, the blended FMAP rate will decrease from 65.500% to 64.658%. The enhanced FMAP rate for the CHIP children and the Women with Breast or Cervical Cancer program will decrease from 75.853% to 75.263%. This change will result in a net cost shift from Federal to GR funds for the Departments of Mental Health, Health and Senior Services, and Social Services. In order to realign the federal match, the Governor recommended an NDI for additional general revenue authority as well as corresponding core reductions in federal authority.														
The Federal Authority is Social Security Act 1905(b).														
Total - Home Health	\$4,146,393	0.00	\$3,982,036	0.00	\$3,982,036	0.00	\$3,149,819	0.00	\$3,149,819	0.00	\$3,149,819	0.00	\$3,149,819	0.00

*Does not include Supplementals.

DEPARTMENT OF SOCIAL SERVICES

Section 11.740 – MO HealthNet Division – Nursing Facility Provider Tax

Book 7, Page 1460

Description: This core request is for ongoing funding of payments for nursing facility services provided to MO HealthNet participants. This item funds the portion of the per diem rate paid to nursing facilities that is funded through the Nursing Facility Reimbursement Allowance (NFRA). Funds from this core are used to provide enhanced payment rates for improving the quality of patient care using the NFRA under Title XIX of the Social Security Act as a General Revenue equivalent.

Legal Base:

Funding Sources: Title XIX-Federal Fund (1163) and Nursing Facility Reimbursement Allowance Fund (1196)

FY 2025 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

No core changes

GOVERNOR:

No core changes

HOUSE:

No core changes

SENATE:

No core changes

CONFERENCE:

No core changes

Dept Of Social Services														
	FY25 Budget Amount*	FY25 Budget FTE*	FY26 Department Request	FY26 Department Request FTE	FY26 Governor Recommended as Amended	FY26 Governor Recommended as Amended FTE	FY26 House Recommended	FY26 House Recommended FTE	FY26 Senate Recommended	FY26 Senate Recommended FTE	FY26 Truly Agreed Finally Passed	FY26 Truly Agreed Finally Passed FTE	FY26 TAFP After VETO Action	FY26 TAFP After VETO Action FTE
Section 11.740														
Nursing Facility Provider Tax - 830366B														
Core														
Federal Funds	244,303,447	0.00	244,303,447	0.00	244,303,447	0.00	244,303,447	0.00	244,303,447	0.00	244,303,447	0.00	244,303,447	0.00
Program-Specific	244,303,447	0.00	244,303,447	0.00	244,303,447	0.00	244,303,447	0.00	244,303,447	0.00	244,303,447	0.00	244,303,447	0.00
Other Funds	128,678,915	0.00	128,678,915	0.00	128,678,915	0.00	128,678,915	0.00	128,678,915	0.00	128,678,915	0.00	128,678,915	0.00
Program-Specific	128,678,915	0.00	128,678,915	0.00	128,678,915	0.00	128,678,915	0.00	128,678,915	0.00	128,678,915	0.00	128,678,915	0.00
Total	\$372,982,362	0.00	\$372,982,362	0.00	\$372,982,362	0.00	\$372,982,362	0.00	\$372,982,362	0.00	\$372,982,362	0.00	\$372,982,362	0.00
Total - Nursing Facility Provider Tax	\$372,982,362	0.00	\$372,982,362	0.00	\$372,982,362	0.00	\$372,982,362	0.00	\$372,982,362	0.00	\$372,982,362	0.00	\$372,982,362	0.00

*Does not include Supplementals.

DEPARTMENT OF SOCIAL SERVICES

Section 11.745 – MO HealthNet Division – Assisted Living Facility Rehab and Preventative Care Services

Book 8, Page 1465

Description: This program provides rehabilitative and preventative care services ordered by a physician and delivered by an Assisted Living Facility (ALF). These facilities are for people who need help with daily care, but not necessarily as much help as a nursing home provides. Typically, ALF residents have access to services such as meals, assistance with personal care, help with medications, housekeeping and laundry, 24-hour supervision, security, and on-site staff. Assisted Living qualifies for additional reimbursement if they provide additional services. ALF services are covered by the MO HealthNet Division (MHD) and are paid through individual physicians through the Physician program (HB 11.715). For FY 2025, this program can receive additional funding through flex language in the appropriation bill from the Supplemental Nursing Care program (HB 11.195).

Legal Base: HB 11

Fund Sources: General Revenue (1101) and Title XIX-Federal Fund (1163)

FY 2025 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

No core changes

GOVERNOR:

No core changes

HOUSE:

No core changes

SENATE:

No core changes

CONFERENCE:

No core changes

Dept Of Social Services														
	FY25 Budget Amount*	FY25 Budget FTE*	FY26 Department Request	FY26 Department Request FTE	FY26 Governor Recommended as Amended	FY26 Governor Recommended as Amended FTE	FY26 House Recommended	FY26 House Recommended FTE	FY26 Senate Recommended	FY26 Senate Recommended FTE	FY26 Truly Agreed Finally Passed	FY26 Truly Agreed Finally Passed FTE	FY26 TAFP After VETO Action	FY26 TAFP After VETO Action FTE
Section 11.745														
Asst Living Fac Rehab Prev Cr - 830395B														
Core														
General Revenue	1	0.00	1	0.00	1	0.00	1	0.00	1	0.00	1	0.00	1	0.00
Program-Specific	1	0.00	1	0.00	1	0.00	1	0.00	1	0.00	1	0.00	1	0.00
Federal Funds	1	0.00	1	0.00	1	0.00	1	0.00	1	0.00	1	0.00	1	0.00
Program-Specific	1	0.00	1	0.00	1	0.00	1	0.00	1	0.00	1	0.00	1	0.00
Total	\$2	0.00	\$2	0.00	\$2	0.00	\$2	0.00	\$2	0.00	\$2	0.00	\$2	0.00
Total - Asst Living Fac Rehab Prev Cr	\$2	0.00	\$2	0.00	\$2	0.00	\$2	0.00	\$2	0.00	\$2	0.00	\$2	0.00

*Does not include Supplementals.

DEPARTMENT OF SOCIAL SERVICES

Section 11.750 – MO HealthNet Division – Long-Term Support Payments

Book 8, Page 1471

Description: This program provides additional reimbursement to qualifying public nursing facilities for their unreimbursed cost, subject to the upper payment limit (UPL). State Medicaid programs cannot pay nursing facilities more than what Medicare would have paid (i.e., Medicare UPL) in the aggregate for the different ownership/operating categories of nursing facilities (i.e., state government, non-state government and private).

Legal Base: State Statute: Section 208.201, RSMo.; Federal Regulation: 42 CFR, 447.272

Fund Sources: Title XIX-Federal Fund (1163) and Long Term Support UPL Fund (1724)

FY 2025 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

No core changes

GOVERNOR:

Core reduction: (\$92,260) FED PSD reduction due to change in the Federal Medical Assistance Percentage (FMAP) rate – see New Decision Item

HOUSE:

Same as Governor – no additional core changes

SENATE:

Same as Governor – no additional core changes

CONFERENCE:

Same as Governor – no additional core changes

Dept Of Social Services														
	FY25 Budget Amount*	FY25 Budget FTE*	FY26 Department Request	FY26 Department Request FTE	FY26 Governor Recommended as Amended	FY26 Governor Recommended as Amended FTE	FY26 House Recommended	FY26 House Recommended FTE	FY26 Senate Recommended	FY26 Senate Recommended FTE	FY26 Truly Agreed Finally Passed	FY26 Truly Agreed Finally Passed FTE	FY26 TAFP After VETO Action	FY26 TAFP After VETO Action FTE
Section 11.750														
Long Term Support Payments - 830222B														
Core														
Federal Funds	7,172,753	0.00	7,172,753	0.00	7,080,493	0.00	7,080,493	0.00	7,080,493	0.00	7,080,493	0.00	7,080,493	0.00
Program-Specific	7,172,753	0.00	7,172,753	0.00	7,080,493	0.00	7,080,493	0.00	7,080,493	0.00	7,080,493	0.00	7,080,493	0.00
Other Funds	3,778,015	0.00	3,778,015	0.00	3,778,015	0.00	3,778,015	0.00	3,778,015	0.00	3,778,015	0.00	3,778,015	0.00
Program-Specific	3,778,015	0.00	3,778,015	0.00	3,778,015	0.00	3,778,015	0.00	3,778,015	0.00	3,778,015	0.00	3,778,015	0.00
Total	\$10,950,768	0.00	\$10,950,768	0.00	\$10,858,508	0.00	\$10,858,508	0.00	\$10,858,508	0.00	\$10,858,508	0.00	\$10,858,508	0.00
FMAP Adjustment - SWO.GV.001														
Other Funds	0	0.00	0	0.00	92,260	0.00	92,260	0.00	92,260	0.00	92,260	0.00	92,260	0.00
Program-Specific	0	0.00	0	0.00	92,260	0.00	92,260	0.00	92,260	0.00	92,260	0.00	92,260	0.00
Total	\$0	0.00	\$0	0.00	\$92,260	0.00	\$92,260	0.00	\$92,260	0.00	\$92,260	0.00	\$92,260	0.00
This funding is requested to compensate for the change in the Federal Medical Assistance Percentage (FMAP). Each year the Centers for Medicare and Medicaid Services (CMS) revises the percentage of Medicaid costs the federal government will reimburse to each state. FMAP varies by state and is based on criteria such as per capita income. Effective October 1, 2025, the blended FMAP rate will decrease from 65.500% to 64.658%. The enhanced FMAP rate for the CHIP children and the Women with Breast or Cervical Cancer program will decrease from 75.853% to 75.263%. This change will result in a net cost shift from Federal to GR funds for the Departments of Mental Health, Health and Senior Services, and Social Services. In order to realign the federal match, the Governor recommended an NDI for additional general revenue authority as well as corresponding core reductions in federal authority.														
The Federal Authority is Social Security Act 1905(b).														
Total - Long Term Support Payments	\$10,950,768	0.00	\$10,950,768	0.00	\$10,950,768	0.00	\$10,950,768	0.00	\$10,950,768	0.00	\$10,950,768	0.00	\$10,950,768	0.00

*Does not include Supplementals.

DEPARTMENT OF SOCIAL SERVICES

Section 11.755 – MO HealthNet Division – Rehabilitation and Specialty Services

Book 8, Page 1477

Description: This item funds rehabilitation and specialty services for the fee-for-service MO HealthNet population. The services funded from this core include: audiology/hearing aid; optical; durable medical equipment (DME); ambulance; physical therapy, occupational therapy, speech therapy, and adaptive training for prosthetic/orthotic devices performed in a rehabilitation center; hospice; comprehensive day rehabilitation for individuals with traumatic brain injuries; and children’s residential treatment. Rehabilitation and specialty services are also available through the MO HealthNet Managed Care health plans.

Legal Base: State Statute: Section 208.152, RSMo.; Federal Law: Social Security Act Section 1905(a) (12) and (18), 1905 (o); Federal Regulation: 42 CFR 410.40, 418, 431.53, 440.60, 440.120, 440.130 and 440.170

Funding Sources: General Revenue (1101), Title XIX-Federal Fund (1163), Nursing Facility Reimbursement Allowance Fund (1196), Health Initiatives Fund (1275), and Ambulance Service Reimbursement Allowance Fund (1958)

FY 2025 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

No core changes

GOVERNOR:

Core reduction: (\$8,000,890) FED PSD reduction due to change in the Federal Medical Assistance Percentage (FMAP) rate – see New Decision Item

HOUSE:

Same as Governor – no additional core changes

SENATE:

Same as Governor – no additional core changes

CONFERENCE:

Same as Governor – no additional core changes

GOVERNOR VETO:

New Decision Item Veto: (\$441,815) (GR \$152,426 and FED \$289,389 PSD) – Air Ambulance Rate Increase NDI

Dept Of Social Services														
	FY25 Budget Amount*	FY25 Budget FTE*	FY26 Department Request	FY26 Department Request FTE	FY26 Governor Recommended as Amended	FY26 Governor Recommended as Amended FTE	FY26 House Recommended	FY26 House Recommended FTE	FY26 Senate Recommended	FY26 Senate Recommended FTE	FY26 Truly Agreed Finally Passed	FY26 Truly Agreed Finally Passed FTE	FY26 TAFP After VETO Action	FY26 TAFP After VETO Action FTE
Section 11.755														
Rehab And Specialty Services - 830223B														
Core														
General Revenue	98,678,987	0.00	98,678,987	0.00	98,678,987	0.00	98,678,987	0.00	98,678,987	0.00	98,678,987	0.00	98,678,987	0.00
Program-Specific	98,678,987	0.00	98,678,987	0.00	98,678,987	0.00	98,678,987	0.00	98,678,987	0.00	98,678,987	0.00	98,678,987	0.00
Federal Funds	224,697,246	0.00	224,697,246	0.00	216,696,356	0.00	216,696,356	0.00	216,696,356	0.00	216,696,356	0.00	216,696,356	0.00
Program-Specific	224,697,246	0.00	224,697,246	0.00	216,696,356	0.00	216,696,356	0.00	216,696,356	0.00	216,696,356	0.00	216,696,356	0.00
Other Funds	11,768,733	0.00	11,768,733	0.00	11,768,733	0.00	11,768,733	0.00	11,768,733	0.00	11,768,733	0.00	11,768,733	0.00
Program-Specific	11,768,733	0.00	11,768,733	0.00	11,768,733	0.00	11,768,733	0.00	11,768,733	0.00	11,768,733	0.00	11,768,733	0.00
Total	\$335,144,966	0.00	\$335,144,966	0.00	\$327,144,076	0.00	\$327,144,076	0.00	\$327,144,076	0.00	\$327,144,076	0.00	\$327,144,076	0.00
Hospice Rate Increase - NOP.83B.005														
General Revenue	0	0.00	137,181	0.00	139,759	0.00	139,759	0.00	139,759	0.00	139,759	0.00	139,759	0.00
Program-Specific	0	0.00	137,181	0.00	139,759	0.00	139,759	0.00	139,759	0.00	139,759	0.00	139,759	0.00
Federal Funds	0	0.00	258,266	0.00	255,688	0.00	255,688	0.00	255,688	0.00	255,688	0.00	255,688	0.00
Program-Specific	0	0.00	258,266	0.00	255,688	0.00	255,688	0.00	255,688	0.00	255,688	0.00	255,688	0.00
Total	\$0	0.00	\$395,447	0.00	\$395,447	0.00	\$395,447	0.00	\$395,447	0.00	\$395,447	0.00	\$395,447	0.00
MO HealthNet reimbursement for hospice care is made at one of four predetermined rates for each day in which an individual is under the care of the hospice. The four levels of care are routine home care, continuous home care, inpatient respite care, or general inpatient care. The rate paid for any day may vary, depending on the level of care furnished. Payment rates are adjusted for regional differences in wages.														
MO HealthNet Cost to Continue - NOP.83B.032														
General Revenue	0	0.00	30,012,658	0.00	34,170,712	0.00	11,154,596	0.00	34,170,712	0.00	11,154,596	0.00	11,154,596	0.00
Program-Specific	0	0.00	30,012,658	0.00	34,170,712	0.00	11,154,596	0.00	34,170,712	0.00	11,154,596	0.00	11,154,596	0.00
Federal Funds	0	0.00	37,297,093	0.00	37,990,800	0.00	36,149,447	0.00	36,149,447	0.00	36,149,447	0.00	36,149,447	0.00
Program-Specific	0	0.00	37,297,093	0.00	37,990,800	0.00	36,149,447	0.00	36,149,447	0.00	36,149,447	0.00	36,149,447	0.00
Total	\$0	0.00	\$67,309,751	0.00	\$72,161,512	0.00	\$47,304,043	0.00	\$70,320,159	0.00	\$47,304,043	0.00	\$47,304,043	0.00
Funds are requested for estimated costs in the FY 2025 budget. These amounts are based on actual MO HealthNet program expenditures through November 2024 and historical trends. It is anticipated that additional funding will be necessary to operate current MO HealthNet programs for Fiscal Year 2026. Programs with estimated shortfalls are listed below.														
Air Ambulance Rate Inc - NOP.SN.196														
General Revenue	0	0.00	0	0.00	0	0.00	0	0.00	152,426	0.00	152,426	0.00	0	0.00
Program-Specific	0	0.00	0	0.00	0	0.00	0	0.00	152,426	0.00	152,426	0.00	0	0.00
Federal Funds	0	0.00	0	0.00	0	0.00	0	0.00	289,389	0.00	289,389	0.00	0	0.00
Program-Specific	0	0.00	0	0.00	0	0.00	0	0.00	289,389	0.00	289,389	0.00	0	0.00
Total	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$441,815	0.00	\$441,815	0.00	\$0	0.00
FMAP Adjustment - SWO.GV.001														
General Revenue	0	0.00	0	0.00	8,000,890	0.00	8,000,890	0.00	8,000,890	0.00	8,000,890	0.00	8,000,890	0.00
Program-Specific	0	0.00	0	0.00	8,000,890	0.00	8,000,890	0.00	8,000,890	0.00	8,000,890	0.00	8,000,890	0.00
Total	\$0	0.00	\$0	0.00	\$8,000,890	0.00	\$8,000,890	0.00	\$8,000,890	0.00	\$8,000,890	0.00	\$8,000,890	0.00

*Does not include Supplementals.

Dept Of Social Services														
	FY25 Budget Amount*	FY25 Budget FTE*	FY26 Department Request	FY26 Department Request FTE	FY26 Governor Recommended as Amended	FY26 Governor Recommended as Amended FTE	FY26 House Recommended	FY26 House Recommended FTE	FY26 Senate Recommended	FY26 Senate Recommended FTE	FY26 Truly Agreed Finally Passed	FY26 Truly Agreed Finally Passed FTE	FY26 TAFP After VETO Action	FY26 TAFP After VETO Action FTE
This funding is requested to compensate for the change in the Federal Medical Assistance Percentage (FMAP). Each year the Centers for Medicare and Medicaid Services (CMS) revises the percentage of Medicaid costs the federal government will reimburse to each state. FMAP varies by state and is based on criteria such as per capita income. Effective October 1, 2025, the blended FMAP rate will decrease from 65.500% to 64.658%. The enhanced FMAP rate for the CHIP children and the Women with Breast or Cervical Cancer program will decrease from 75.853% to 75.263%. This change will result in a net cost shift from Federal to GR funds for the Departments of Mental Health, Health and Senior Services, and Social Services. In order to realign the federal match, the Governor recommended an NDI for additional general revenue authority as well as corresponding core reductions in federal authority.														
The Federal Authority is Social Security Act 1905(b).														
Total - Rehab And Specialty Services	\$335,144,966	0.00	\$402,850,164	0.00	\$407,701,925	0.00	\$382,844,456	0.00	\$406,302,387	0.00	\$383,286,271	0.00	\$382,844,456	0.00

*Does not include Supplementals.

DEPARTMENT OF SOCIAL SERVICES

Section 11.755 cont. – MO HealthNet Division – Non-Emergency Medical Transportation (NEMT)

Book 8, Page 1488

Description: This section provides funding for Non-Emergency Medical Transportation (NEMT) for the fee-for-service program. The purpose of the NEMT program is to ensure transportation services to MO HealthNet participants who do not otherwise have access to appropriate transportation to and from scheduled MO HealthNet covered services.

Legal Base: State Statute: Section 208.152, RSMo.; Federal Regulation: 42 CFR 431.53 and 440.170

Funding Sources: General Revenue (1101) and Title XIX-Federal Fund (1163)

FY 2025 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

No core changes

GOVERNOR:

Core reduction: (\$389,859) GR PSD reduction due to change in the Federal Medical Assistance Percentage (FMAP) rate – see New Decision Item

HOUSE:

Same as Governor – no additional core changes

SENATE:

Same as Governor – no additional core changes

CONFERENCE:

Same as Governor – no additional core changes

Dept Of Social Services														
	FY25 Budget Amount*	FY25 Budget FTE*	FY26 Department Request	FY26 Department Request FTE	FY26 Governor Recommended as Amended	FY26 Governor Recommended as Amended FTE	FY26 House Recommended	FY26 House Recommended FTE	FY26 Senate Recommended	FY26 Senate Recommended FTE	FY26 Truly Agreed Finally Passed	FY26 Truly Agreed Finally Passed FTE	FY26 TAFP After VETO Action	FY26 TAFP After VETO Action FTE
Section 11.755														
Non-Emergency Transport - 830225B														
Core														
General Revenue	19,113,698	0.00	19,113,698	0.00	18,723,839	0.00	18,723,839	0.00	18,723,839	0.00	18,723,839	0.00	18,723,839	0.00
Program-Specific	19,113,698	0.00	19,113,698	0.00	18,723,839	0.00	18,723,839	0.00	18,723,839	0.00	18,723,839	0.00	18,723,839	0.00
Federal Funds	37,812,096	0.00	37,812,096	0.00	37,812,096	0.00	37,812,096	0.00	37,812,096	0.00	37,812,096	0.00	37,812,096	0.00
Program-Specific	37,812,096	0.00	37,812,096	0.00	37,812,096	0.00	37,812,096	0.00	37,812,096	0.00	37,812,096	0.00	37,812,096	0.00
Total	\$56,925,794	0.00	\$56,925,794	0.00	\$56,535,935	0.00	\$56,535,935	0.00	\$56,535,935	0.00	\$56,535,935	0.00	\$56,535,935	0.00
NEMT Actuarial Increase - NOP.83B.016														
General Revenue	0	0.00	1,076,029	0.00	1,096,253	0.00	1,096,253	0.00	1,096,253	0.00	1,096,253	0.00	1,096,253	0.00
Program-Specific	0	0.00	1,076,029	0.00	1,096,253	0.00	1,096,253	0.00	1,096,253	0.00	1,096,253	0.00	1,096,253	0.00
Federal Funds	0	0.00	2,025,812	0.00	2,005,588	0.00	2,005,588	0.00	2,005,588	0.00	2,005,588	0.00	2,005,588	0.00
Program-Specific	0	0.00	2,025,812	0.00	2,005,588	0.00	2,005,588	0.00	2,005,588	0.00	2,005,588	0.00	2,005,588	0.00
Total	\$0	0.00	\$3,101,841	0.00	\$3,101,841	0.00	\$3,101,841	0.00	\$3,101,841	0.00	\$3,101,841	0.00	\$3,101,841	0.00
Funding is needed for the Non-Emergency Medical Transportation (NEMT) contract cost increase. The cost increase is attributed to the increase needed to maintain actuarial soundness in SFY 26. Federal regulation 42 CFR 438.4 requires the capitation payments be actuarially sound.														
The purpose of the NEMT program is to ensure non-emergency medical transportation to scheduled MO HealthNet covered services for MO HealthNet participants in the fee-for-service program who do not have access to free and appropriate transportation. The participant is to be provided with the most appropriate mode of transportation. The state contracts with a statewide broker and pays monthly capitation payments for each NEMT participant, based on eligibility group, and which of the four regions of the state the participant resides.														
MO HealthNet Cost to Continue - NOP.83B.032														
General Revenue	0	0.00	2,089,902	0.00	1,943,792	0.00	1,570,452	0.00	1,570,452	0.00	1,570,452	0.00	1,570,452	0.00
Program-Specific	0	0.00	2,089,902	0.00	1,943,792	0.00	1,570,452	0.00	1,570,452	0.00	1,570,452	0.00	1,570,452	0.00
Federal Funds	0	0.00	4,662,863	0.00	3,297,693	0.00	2,621,145	0.00	2,621,145	0.00	2,621,145	0.00	2,621,145	0.00
Program-Specific	0	0.00	4,662,863	0.00	3,297,693	0.00	2,621,145	0.00	2,621,145	0.00	2,621,145	0.00	2,621,145	0.00
Total	\$0	0.00	\$6,752,765	0.00	\$5,241,485	0.00	\$4,191,597	0.00	\$4,191,597	0.00	\$4,191,597	0.00	\$4,191,597	0.00
Funds are requested for estimated costs in the FY 2025 budget. These amounts are based on actual MO HealthNet program expenditures through November 2024 and historical trends. It is anticipated that additional funding will be necessary to operate current MO HealthNet programs for Fiscal Year 2026. Programs with estimated shortfalls are listed below.														
FMAP Adjustment - SWO.GV.001														
Federal Funds	0	0.00	0	0.00	389,859	0.00	389,859	0.00	389,859	0.00	389,859	0.00	389,859	0.00
Program-Specific	0	0.00	0	0.00	389,859	0.00	389,859	0.00	389,859	0.00	389,859	0.00	389,859	0.00
Total	\$0	0.00	\$0	0.00	\$389,859	0.00	\$389,859	0.00	\$389,859	0.00	\$389,859	0.00	\$389,859	0.00
This funding is requested to compensate for the change in the Federal Medical Assistance Percentage (FMAP). Each year the Centers for Medicare and Medicaid Services (CMS) revises the percentage of Medicaid costs the federal government will reimburse to each state. FMAP varies by state and is based on criteria such as per capita income. Effective October 1, 2025, the blended FMAP rate will decrease from 65.500% to 64.658%. The enhanced FMAP rate for the CHIP children and the Women with Breast or Cervical Cancer program will decrease from 75.853% to 75.263%. This change will result in a net cost shift from Federal to GR funds for the Departments of Mental Health, Health and Senior Services, and Social Services. In order to realign the federal match, the Governor recommended an NDI for additional general revenue authority as well as corresponding core reductions in federal authority.														
The Federal Authority is Social Security Act 1905(b).														
Total - Non-Emergency Transport	\$56,925,794	0.00	\$66,780,400	0.00	\$65,269,120	0.00	\$64,219,232	0.00	\$64,219,232	0.00	\$64,219,232	0.00	\$64,219,232	0.00

DEPARTMENT OF SOCIAL SERVICES

Section 11.760 – MO HealthNet Division – Ground Emergency Medical Transportation (GEMT)

Book 8, Page 1499

Description: This core request is to provide funding for payments for Ground Emergency Medical Transportation (GEMT) for the fee-for-service program. The GEMT program is a voluntary program that makes supplemental payments to eligible GEMT providers who furnish qualifying emergency ambulance services to Department of Social Services, MO HealthNet Division (MHD) participants. Providers must agree to fund the non-federal share of GEMT uncompensated cost reimbursement using an intergovernmental transfer (IGT) payment method. MHD will make supplemental payments to qualifying ambulance providers up to the amount uncompensated by all other sources of reimbursement. Total reimbursement from MHD, including the supplemental payment, will not exceed one hundred percent of actual costs.

Legal Base: State Statute: Section 208.1030 and 208.1032, RSMo.; Senate Bill 607 passed by the 98th General Assembly in 2016; Federal Regulation: Section 433.316 of Title 42

Funding Sources: Title XIX-Federal Fund (1163) and Ground Emergency Medical Transportation Fund (1422)

FY 2025 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

No core changes

GOVERNOR:

Core reduction: (\$707,365) FED PSD reduction due to change in the Federal Medical Assistance Percentage (FMAP) rate – see New Decision Item

HOUSE:

Same as Governor – no additional core changes

SENATE:

Same as Governor – no additional core changes

CONFERENCE:

Same as Governor – no additional core changes

Dept Of Social Services														
	FY25 Budget Amount*	FY25 Budget FTE*	FY26 Department Request	FY26 Department Request FTE	FY26 Governor Recommended as Amended	FY26 Governor Recommended as Amended FTE	FY26 House Recommended	FY26 House Recommended FTE	FY26 Senate Recommended	FY26 Senate Recommended FTE	FY26 Truly Agreed Finally Passed	FY26 Truly Agreed Finally Passed FTE	FY26 TAFP After VETO Action	FY26 TAFP After VETO Action FTE
Section 11.760														
Ground Emer Med Transport - 830226B														
Core														
Federal Funds	54,993,961	0.00	54,993,961	0.00	54,286,596	0.00	54,286,596	0.00	54,286,596	0.00	54,286,596	0.00	54,286,596	0.00
Program-Specific	54,993,961	0.00	54,993,961	0.00	54,286,596	0.00	54,286,596	0.00	54,286,596	0.00	54,286,596	0.00	54,286,596	0.00
Other Funds	28,966,285	0.00	28,966,285	0.00	28,966,285	0.00	28,966,285	0.00	28,966,285	0.00	28,966,285	0.00	28,966,285	0.00
Program-Specific	28,966,285	0.00	28,966,285	0.00	28,966,285	0.00	28,966,285	0.00	28,966,285	0.00	28,966,285	0.00	28,966,285	0.00
Total	\$83,960,246	0.00	\$83,960,246	0.00	\$83,252,881	0.00	\$83,252,881	0.00	\$83,252,881	0.00	\$83,252,881	0.00	\$83,252,881	0.00
FMAP Adjustment - SWO.GV.001														
Other Funds	0	0.00	0	0.00	707,365	0.00	707,365	0.00	707,365	0.00	707,365	0.00	707,365	0.00
Program-Specific	0	0.00	0	0.00	707,365	0.00	707,365	0.00	707,365	0.00	707,365	0.00	707,365	0.00
Total	\$0	0.00	\$0	0.00	\$707,365	0.00	\$707,365	0.00	\$707,365	0.00	\$707,365	0.00	\$707,365	0.00
This funding is requested to compensate for the change in the Federal Medical Assistance Percentage (FMAP). Each year the Centers for Medicare and Medicaid Services (CMS) revises the percentage of Medicaid costs the federal government will reimburse to each state. FMAP varies by state and is based on criteria such as per capita income. Effective October 1, 2025, the blended FMAP rate will decrease from 65.500% to 64.658%. The enhanced FMAP rate for the CHIP children and the Women with Breast or Cervical Cancer program will decrease from 75.853% to 75.263%. This change will result in a net cost shift from Federal to GR funds for the Departments of Mental Health, Health and Senior Services, and Social Services. In order to realign the federal match, the Governor recommended an NDI for additional general revenue authority as well as corresponding core reductions in federal authority.														
The Federal Authority is Social Security Act 1905(b).														
Total - Ground Emer Med Transport	\$83,960,246	0.00	\$83,960,246	0.00	\$83,960,246	0.00	\$83,960,246	0.00	\$83,960,246	0.00	\$83,960,246	0.00	\$83,960,246	0.00

*Does not include Supplementals.

DEPARTMENT OF SOCIAL SERVICES

Section 11.765 – MO HealthNet Division – Complex Rehabilitation Technology Products

Book 8, Page 1504

Description: The Complex Rehab Technology program includes items classified within the Medicare program as Durable Medical Equipment (DME) that are individually configured for individuals to meet their specific and unique medical, physical, and functional capacities for basic and instrumental activities of daily living to prevent hospitalization and/or institutionalization of a patient with complex needs. Such items must be identified as medically necessary and include, but are not limited to, complex rehabilitation power wheelchairs, highly configurable manual wheelchairs, adaptive seating and positioning seats, and other specialized equipment such as standing frames and gait trainers.

Legal Base: State Statute: Section 208.152, RSMo.; Federal Law: Social Security Act Section 1905 (a) (12) and (18), 1905 (o); Federal Regulation: 42 CFR 410.40, 418, 431.53, 440.60, 440.120, 440.130 and 440.170

Funding Sources: General Revenue (1101) and Title XIX-Federal Fund (1163)

FY 2025 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

No core changes

GOVERNOR:

Core reduction: (\$61,461) FED PSD reduction due to change in the Federal Medical Assistance Percentage (FMAP) rate – see New Decision Item

HOUSE:

Core reduction: (\$2,292,500) (GR \$412,592 and FED \$1,879,908 PSD) reduction based on January end-of-month (EOM) projections

SENATE:

Same as House – no additional core changes

CONFERENCE:

Same as House – no additional core changes

Dept Of Social Services														
	FY25 Budget Amount*	FY25 Budget FTE*	FY26 Department Request	FY26 Department Request FTE	FY26 Governor Recommended as Amended	FY26 Governor Recommended as Amended FTE	FY26 House Recommended	FY26 House Recommended FTE	FY26 Senate Recommended	FY26 Senate Recommended FTE	FY26 Truly Agreed Finally Passed	FY26 Truly Agreed Finally Passed FTE	FY26 TAFP After VETO Action	FY26 TAFP After VETO Action FTE
Section 11.765														
Complex Rehab Technlgy Prducts - 830227B														
Core														
General Revenue	5,078,409	0.00	5,078,409	0.00	5,078,409	0.00	4,665,817	0.00	4,665,817	0.00	4,665,817	0.00	4,665,817	0.00
Program-Specific	5,078,409	0.00	5,078,409	0.00	5,078,409	0.00	4,665,817	0.00	4,665,817	0.00	4,665,817	0.00	4,665,817	0.00
Federal Funds	9,464,621	0.00	9,464,621	0.00	9,403,160	0.00	7,523,252	0.00	7,523,252	0.00	7,523,252	0.00	7,523,252	0.00
Program-Specific	9,464,621	0.00	9,464,621	0.00	9,403,160	0.00	7,523,252	0.00	7,523,252	0.00	7,523,252	0.00	7,523,252	0.00
Total	\$14,543,030	0.00	\$14,543,030	0.00	\$14,481,569	0.00	\$12,189,069	0.00	\$12,189,069	0.00	\$12,189,069	0.00	\$12,189,069	0.00
MO HealthNet Cost to Continue - NOP.83B.032														
General Revenue	0	0.00	280,014	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
Program-Specific	0	0.00	280,014	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
Federal Funds	0	0.00	623,548	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
Program-Specific	0	0.00	623,548	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
Total	\$0	0.00	\$903,562	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00
Funds are requested for estimated costs in the FY 2025 budget. These amounts are based on actual MO HealthNet program expenditures through November 2024 and historical trends. It is anticipated that additional funding will be necessary to operate current MO HealthNet programs for Fiscal Year 2026. Programs with estimated shortfalls are listed below.														
FMAP Adjustment - SWO.GV.001														
General Revenue	0	0.00	0	0.00	61,461	0.00	61,461	0.00	61,461	0.00	61,461	0.00	61,461	0.00
Program-Specific	0	0.00	0	0.00	61,461	0.00	61,461	0.00	61,461	0.00	61,461	0.00	61,461	0.00
Total	\$0	0.00	\$0	0.00	\$61,461	0.00	\$61,461	0.00	\$61,461	0.00	\$61,461	0.00	\$61,461	0.00
This funding is requested to compensate for the change in the Federal Medical Assistance Percentage (FMAP). Each year the Centers for Medicare and Medicaid Services (CMS) revises the percentage of Medicaid costs the federal government will reimburse to each state. FMAP varies by state and is based on criteria such as per capita income. Effective October 1, 2025, the blended FMAP rate will decrease from 65.500% to 64.658%. The enhanced FMAP rate for the CHIP children and the Women with Breast or Cervical Cancer program will decrease from 75.853% to 75.263%. This change will result in a net cost shift from Federal to GR funds for the Departments of Mental Health, Health and Senior Services, and Social Services. In order to realign the federal match, the Governor recommended an NDI for additional general revenue authority as well as corresponding core reductions in federal authority.														
The Federal Authority is Social Security Act 1905(b).														
Total - Complex Rehab Technlgy Prducts	\$14,543,030	0.00	\$15,446,592	0.00	\$14,543,030	0.00	\$12,250,530	0.00	\$12,250,530	0.00	\$12,250,530	0.00	\$12,250,530	0.00

*Does not include Supplementals.

DEPARTMENT OF SOCIAL SERVICES
Section 11.770 – MO HealthNet Division – Managed Care

Book 8, Page 1511

Description: The MO HealthNet Division operates a Health Maintenance Organization (HMO) style managed care program in which the state of Missouri contracts with MO HealthNet Managed Care health plans (also referred to as Managed Care Organizations (MCOs)). The MO HealthNet Managed Care health plans provide health care services to enrollees and are paid a monthly capitation payment for each enrollee they serve. MO HealthNet Managed Care's objectives are to provide the means to ensure access, manage and coordinate benefits, and monitor quality of care and outcomes while controlling costs. As of May 1, 2017, statewide participation in MO HealthNet Managed Care is mandatory for the following MO HealthNet eligibility groups: MO HealthNet for Families - Adults and Children; MO HealthNet for Children; MO HealthNet for Pregnant Women; Children's Health Insurance Program (CHIP); Show Me Healthy Kids (SMHK); Show Me Healthy Babies Program (SMHB).

Legal Base: State Statute: Section 208.166, RSMo.; Federal Law: Social Security Act Sections 1902(a) (4), 1903 (m), 1915 (b), 1932; Federal Regulation: 42 CFR 438 and 412.106
Funding Sources: General Revenue (1101), Title XIX-Federal Fund (1163), Uncompensated Care Fund (1108), Health Initiatives Fund (1275), Federal Reimbursement Allowance Fund (1142), Healthy Families Trust Fund (1625), Life Sciences Research Trust Fund (1763), Premium Fund (1885), and Ambulance Service Reimbursement Allowance Fund (1958)
FY 2025 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

Core reduction: (\$336,261,547) GR PSD reduction of one-time funding – see New Decision Item
(\$105,340,744) (GR \$32,970,347 and FED \$72,370,397 PSD) reduction due to estimated lapse

GOVERNOR:

Core reduction: (\$13,277,118) FED PSD reduction due to change in the Federal Medical Assistance Percentage (FMAP) rate – see New Decision Item

HOUSE:

Core reduction: (\$35,132,246) FED PSD reduction based on January end-of-month (EOM) projections
(\$85,245,551) GR PSD reduction to fund switch from General Revenue (1101) to Medicaid Stabilization Fund (1809) – see New Decision Item
Core restoration: \$10,464,902 GR PSD restoration based on January end-of-month (EOM) projections – reversed a portion of Department's change

SENATE:

Core restoration: \$85,245,551 GR PSD restoration to fund switch from Medicaid Stabilization Fund (1809) to General Revenue (1101) – reversed House's change

CONFERENCE:

Core reduction: (\$85,245,551) GR PSD reduction to fund switch from General Revenue (1101) to Medicaid Stabilization Fund (1809) – see New Decision Item – reversed Senate's change

GOVERNOR VETO:

New Decision Item Veto: (\$132,272) (GR \$45,634 and FED \$86,638 PSD) – Air Ambulance Rate Increase NDI

Dept Of Social Services														
	FY25 Budget Amount*	FY25 Budget FTE*	FY26 Department Request	FY26 Department Request FTE	FY26 Governor Recommended as Amended	FY26 Governor Recommended as Amended FTE	FY26 House Recommended	FY26 House Recommended FTE	FY26 Senate Recommended	FY26 Senate Recommended FTE	FY26 Truly Agreed Finally Passed	FY26 Truly Agreed Finally Passed FTE	FY26 TAFP After VETO Action	FY26 TAFP After VETO Action FTE
Section 11.770														
Managed Care - 830228B														
Core														
General Revenue	457,596,344	0.00	88,364,450	0.00	88,364,450	0.00	13,583,801	0.00	98,829,352	0.00	13,583,801	0.00	13,583,801	0.00
Program-Specific	457,596,344	0.00	88,364,450	0.00	88,364,450	0.00	13,583,801	0.00	98,829,352	0.00	13,583,801	0.00	13,583,801	0.00
Federal Funds	1,407,652,984	0.00	1,335,282,587	0.00	1,322,005,469	0.00	1,286,873,223	0.00	1,286,873,223	0.00	1,286,873,223	0.00	1,286,873,223	0.00
Program-Specific	1,407,652,984	0.00	1,335,282,587	0.00	1,322,005,469	0.00	1,286,873,223	0.00	1,286,873,223	0.00	1,286,873,223	0.00	1,286,873,223	0.00
Other Funds	284,658,047	0.00	284,658,047	0.00	284,658,047	0.00	284,658,047	0.00	284,658,047	0.00	284,658,047	0.00	284,658,047	0.00
Program-Specific	284,658,047	0.00	284,658,047	0.00	284,658,047	0.00	284,658,047	0.00	284,658,047	0.00	284,658,047	0.00	284,658,047	0.00
Total	\$2,149,907,375	0.00	\$1,708,305,084	0.00	\$1,695,027,966	0.00	\$1,585,115,071	0.00	\$1,670,360,622	0.00	\$1,585,115,071	0.00	\$1,585,115,071	0.00
GR Pick Up for MC One-Time - NOP.83B.004														
General Revenue	0	0.00	336,261,647	0.00	336,261,647	0.00	0	0.00	336,261,647	0.00	0	0.00	0	0.00
Program-Specific	0	0.00	336,261,647	0.00	336,261,647	0.00	0	0.00	336,261,647	0.00	0	0.00	0	0.00
Total	\$0	0.00	\$336,261,647	0.00	\$336,261,647	0.00	\$0	0.00	\$336,261,647	0.00	\$0	0.00	\$0	0.00
For SFY 2025, the General Assembly appropriated one-time General Revenue in the amount of \$336,261,547 in the Managed Care House Bill section (HB 11.770). This funding is needed as an on-going appropriation versus a one-time.														
MC Actuarial Increase - NOP.83B.006														
General Revenue	0	0.00	53,130,981	0.00	54,129,580	0.00	0	0.00	54,129,580	0.00	0	0.00	0	0.00
Program-Specific	0	0.00	53,130,981	0.00	54,129,580	0.00	0	0.00	54,129,580	0.00	0	0.00	0	0.00
Federal Funds	0	0.00	100,028,376	0.00	99,029,777	0.00	0	0.00	99,029,777	0.00	0	0.00	0	0.00
Program-Specific	0	0.00	100,028,376	0.00	99,029,777	0.00	0	0.00	99,029,777	0.00	0	0.00	0	0.00
Total	\$0	0.00	\$153,159,357	0.00	\$153,159,357	0.00	\$0	0.00	\$153,159,357	0.00	\$0	0.00	\$0	0.00
This NDI is needed to fund an increase for managed care medical services, including the Managed Care, Adult Expansion Group (AEG), Managed Care Specialty Plan, CHIP, and Show Me Healthy Babies (SMHB) populations. The FY26 rates are based on an estimated budget trend developed utilizing actuarial standards which consider historical trends in utilization and inflation, budget and legislative changes, and federal requirements. MO HealthNet needs to maintain capitation rates at a sufficient level to ensure continued health plan and provider participation. The Federal Authority is Social Security Act Section 1915(b) and 1115 Waiver. The Federal Regulation is 42 CFR 438-Managed Care, and the State Authority is Section 208.166, RSMo. Final federal rules and regulations published June 14, 2002, effective August 13, 2003, require that capitation payments made on behalf of managed care participants be actuarially sound. Further, the state must provide the actuarial certification of the capitation rates to the CMS. The CMS Regional Office must review and approve all contracts for managed care as a condition for federal financial participation.														
Medicare Parity Pay to PC Phy - NOP.HS.024														
General Revenue	0	0.00	0	0.00	0	0.00	500,000	0.00	500,000	0.00	500,000	0.00	500,000	0.00
Program-Specific	0	0.00	0	0.00	0	0.00	500,000	0.00	500,000	0.00	500,000	0.00	500,000	0.00
Federal Funds	0	0.00	0	0.00	0	0.00	914,747	0.00	914,747	0.00	914,747	0.00	914,747	0.00
Program-Specific	0	0.00	0	0.00	0	0.00	914,747	0.00	914,747	0.00	914,747	0.00	914,747	0.00
Total	\$0	0.00	\$0	0.00	\$0	0.00	\$1,414,747	0.00	\$1,414,747	0.00	\$1,414,747	0.00	\$1,414,747	0.00
Fund Switch GR to Med Stab - NOP.HS.046														
Federal Funds	0	0.00	0	0.00	0	0.00	421,507,198	0.00	0	0.00	421,507,198	0.00	421,507,198	0.00
Program-Specific	0	0.00	0	0.00	0	0.00	421,507,198	0.00	0	0.00	421,507,198	0.00	421,507,198	0.00
Total	\$0	0.00	\$0	0.00	\$0	0.00	\$421,507,198	0.00	\$0	0.00	\$421,507,198	0.00	\$421,507,198	0.00
Air Ambulance Rate Inc - NOP.SN.196														
General Revenue	0	0.00	0	0.00	0	0.00	0	0.00	45,634	0.00	45,634	0.00	0	0.00

*Does not include Supplementals.

Dept Of Social Services														
	FY25 Budget Amount*	FY25 Budget FTE*	FY26 Department Request	FY26 Department Request FTE	FY26 Governor Recommended as Amended	FY26 Governor Recommended as Amended FTE	FY26 House Recommended	FY26 House Recommended FTE	FY26 Senate Recommended	FY26 Senate Recommended FTE	FY26 Truly Agreed Finally Passed	FY26 Truly Agreed Finally Passed FTE	FY26 TAFP After VETO Action	FY26 TAFP After VETO Action FTE
Program-Specific	0	0.00	0	0.00	0	0.00	0	0.00	45,634	0.00	45,634	0.00	0	0.00
Federal Funds	0	0.00	0	0.00	0	0.00	0	0.00	86,638	0.00	86,638	0.00	0	0.00
Program-Specific	0	0.00	0	0.00	0	0.00	0	0.00	86,638	0.00	86,638	0.00	0	0.00
Total	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$132,272	0.00	\$132,272	0.00	\$0	0.00
FMAP Adjustment - SWO.GV.001														
General Revenue	0	0.00	0	0.00	12,694,675	0.00	12,694,675	0.00	12,694,675	0.00	12,694,675	0.00	12,694,675	0.00
Program-Specific	0	0.00	0	0.00	12,694,675	0.00	12,694,675	0.00	12,694,675	0.00	12,694,675	0.00	12,694,675	0.00
Other Funds	0	0.00	0	0.00	582,443	0.00	582,443	0.00	582,443	0.00	582,443	0.00	582,443	0.00
Program-Specific	0	0.00	0	0.00	582,443	0.00	582,443	0.00	582,443	0.00	582,443	0.00	582,443	0.00
Total	\$0	0.00	\$0	0.00	\$13,277,118	0.00	\$13,277,118	0.00	\$13,277,118	0.00	\$13,277,118	0.00	\$13,277,118	0.00
This funding is requested to compensate for the change in the Federal Medical Assistance Percentage (FMAP). Each year the Centers for Medicare and Medicaid Services (CMS) revises the percentage of Medicaid costs the federal government will reimburse to each state. FMAP varies by state and is based on criteria such as per capita income. Effective October 1, 2025, the blended FMAP rate will decrease from 65.500% to 64.658%. The enhanced FMAP rate for the CHIP children and the Women with Breast or Cervical Cancer program will decrease from 75.853% to 75.263%. This change will result in a net cost shift from Federal to GR funds for the Departments of Mental Health, Health and Senior Services, and Social Services. In order to realign the federal match, the Governor recommended an NDI for additional general revenue authority as well as corresponding core reductions in federal authority.														
The Federal Authority is Social Security Act 1905(b).														
Total - Managed Care	\$2,149,907,375	0.00	\$2,197,726,088	0.00	\$2,197,726,088	0.00	\$2,021,314,134	0.00	\$2,174,605,763	0.00	\$2,021,446,406	0.00	\$2,021,314,134	0.00

*Does not include Supplementals.

DEPARTMENT OF SOCIAL SERVICES

Section 11.770 cont. – MO HealthNet Division – Managed Care General Plan – Public Ground Emergency Medical Transportation Services

Book 8, Page 1518

Description: This funding is for payments to providers of public ground emergency medical transportation (GEMT) when providing services to persons paid for under this section.

Legal Base: State Statute: Sections 208.1030 and 208.1032, RSMo.

Funding Sources: Title XIX-Federal Fund (1163) and Ground Emergency Medical Transportation Fund (1422)

FY 2025 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

No core changes

GOVERNOR:

No core changes

HOUSE:

No core changes

SENATE:

No core changes

CONFERENCE:

No core changes

Dept Of Social Services														
	FY25 Budget Amount*	FY25 Budget FTE*	FY26 Department Request	FY26 Department Request FTE	FY26 Governor Recommended as Amended	FY26 Governor Recommended as Amended FTE	FY26 House Recommended	FY26 House Recommended FTE	FY26 Senate Recommended	FY26 Senate Recommended FTE	FY26 Truly Agreed Finally Passed	FY26 Truly Agreed Finally Passed FTE	FY26 TAFP After VETO Action	FY26 TAFP After VETO Action FTE
Section 11.770														
Mc General Plan Public Gemt - 830367B														
Core														
Federal Funds	25,954,375	0.00	25,954,375	0.00	25,954,375	0.00	25,954,375	0.00	25,954,375	0.00	25,954,375	0.00	25,954,375	0.00
Program-Specific	25,954,375	0.00	25,954,375	0.00	25,954,375	0.00	25,954,375	0.00	25,954,375	0.00	25,954,375	0.00	25,954,375	0.00
Other Funds	13,670,624	0.00	13,670,624	0.00	13,670,624	0.00	13,670,624	0.00	13,670,624	0.00	13,670,624	0.00	13,670,624	0.00
Program-Specific	13,670,624	0.00	13,670,624	0.00	13,670,624	0.00	13,670,624	0.00	13,670,624	0.00	13,670,624	0.00	13,670,624	0.00
Total	\$39,624,999	0.00	\$39,624,999	0.00	\$39,624,999	0.00	\$39,624,999	0.00	\$39,624,999	0.00	\$39,624,999	0.00	\$39,624,999	0.00
Total - Mc General Plan Public Gemt	\$39,624,999	0.00	\$39,624,999	0.00	\$39,624,999	0.00	\$39,624,999	0.00	\$39,624,999	0.00	\$39,624,999	0.00	\$39,624,999	0.00

*Does not include Supplementals.

DEPARTMENT OF SOCIAL SERVICES

Section 11.771 – MO HealthNet Division – Hospital and Clinic Projects

Book 8, Page 1544

Description: This section provides one-time funding to clinics and hospitals in Missouri to allow to purchase medical equipment and/or pay for the construction or renovations for these medical centers.

Legal Base: HB 11

Funding Sources: General Revenue (1101) and Budget Stabilization (1522)

FY 2025 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

Core reduction: (\$48,686,000) (GR \$43,686,000 and FED \$5,000,000 PSD) reduction of one-time funding – see FY 2026 HB 17–Reappropriations
Kirksville Cancer Center (Hannibal Regional Healthcare System) – GR \$15,000,000
Children’s Mercy Hospital-KC – GR \$25,000,000
Cameron Regional Hospital – GR \$1,761,000
Golden Valley Memorial Hospital – GR \$425,000
Mercy Hospital-Mountain View – GR \$1,500,000
Bootheel Healthcare Foundation in Dunklin County-Bootheel Hospital Project – FED \$5,000,000

GOVERNOR:

Same as Department – no additional core changes

HOUSE:

Same as Department – no additional core changes

SENATE:

Same as Department – no additional core changes – see New Decision Items

CONFERENCE:

Same as Department – no additional core changes – made NDIs one-time funding

Dept Of Social Services														
	FY25 Budget Amount*	FY25 Budget FTE*	FY26 Department Request	FY26 Department Request FTE	FY26 Governor Recommended as Amended	FY26 Governor Recommended as Amended FTE	FY26 House Recommended	FY26 House Recommended FTE	FY26 Senate Recommended	FY26 Senate Recommended FTE	FY26 Truly Agreed Finally Passed	FY26 Truly Agreed Finally Passed FTE	FY26 TAFP After VETO Action	FY26 TAFP After VETO Action FTE
Section 11.771														
Hospital And Clinic Projects - 830328B														
Core														
General Revenue	43,686,000	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
Program-Specific	43,686,000	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
Federal Funds	5,000,000	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
Program-Specific	5,000,000	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
Total	\$48,686,000	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00
Kirksville Hospital - NOP.SN.197														
General Revenue	0	0.00	0	0.00	0	0.00	0	0.00	15,000,000	0.00	15,000,000	0.00	15,000,000	0.00
Program-Specific	0	0.00	0	0.00	0	0.00	0	0.00	15,000,000	0.00	15,000,000	0.00	15,000,000	0.00
Total	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$15,000,000	0.00	\$15,000,000	0.00	\$15,000,000	0.00
Bootheel Healthcare - NOP.SN.198														
General Revenue	0	0.00	0	0.00	0	0.00	0	0.00	25,000,000	0.00	25,000,000	0.00	25,000,000	0.00
Program-Specific	0	0.00	0	0.00	0	0.00	0	0.00	25,000,000	0.00	25,000,000	0.00	25,000,000	0.00
Total	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$25,000,000	0.00	\$25,000,000	0.00	\$25,000,000	0.00
Ozark Healthcare - NOP.SN.199														
General Revenue	0	0.00	0	0.00	0	0.00	0	0.00	2,000,000	0.00	2,000,000	0.00	2,000,000	0.00
Program-Specific	0	0.00	0	0.00	0	0.00	0	0.00	2,000,000	0.00	2,000,000	0.00	2,000,000	0.00
Total	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$2,000,000	0.00	\$2,000,000	0.00	\$2,000,000	0.00
Citizens Memorial Hosp - NOP.SN.200														
General Revenue	0	0.00	0	0.00	0	0.00	0	0.00	1,000,000	0.00	1,000,000	0.00	1,000,000	0.00
Program-Specific	0	0.00	0	0.00	0	0.00	0	0.00	1,000,000	0.00	1,000,000	0.00	1,000,000	0.00
Total	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$1,000,000	0.00	\$1,000,000	0.00	\$1,000,000	0.00
Missouri Delta - NOP.SN.201														
General Revenue	0	0.00	0	0.00	0	0.00	0	0.00	2,037,900	0.00	2,037,900	0.00	2,037,900	0.00
Program-Specific	0	0.00	0	0.00	0	0.00	0	0.00	2,037,900	0.00	2,037,900	0.00	2,037,900	0.00
Total	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$2,037,900	0.00	\$2,037,900	0.00	\$2,037,900	0.00
Community Health Ctr - NOP.SN.202														
General Revenue	0	0.00	0	0.00	0	0.00	0	0.00	3,000,000	0.00	1,000,000	0.00	1,000,000	0.00
Program-Specific	0	0.00	0	0.00	0	0.00	0	0.00	3,000,000	0.00	1,000,000	0.00	1,000,000	0.00
Total	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$3,000,000	0.00	\$1,000,000	0.00	\$1,000,000	0.00
Total - Hospital And Clinic Projects	\$48,686,000	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$48,037,900	0.00	\$46,037,900	0.00	\$46,037,900	0.00

*Does not include Supplementals.

DEPARTMENT OF SOCIAL SERVICES

Section 11.773 – MO HealthNet Division – Phelps Health Emergency Room

Book 8, Page 1549

Description: This appropriation provides funding for the demolition, planning, design, construction, equipment, and/or renovation needs for an emergency room at Phelps Health in Phelps County.

Legal Base: HB 11

Funding Sources: General Revenue (1101)

FY 2025 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

Core reduction: (\$5,000,000) GR PSD reduction of one-time funding – eliminates funding for the program – see FY 2026 HB 17–Reappropriations

GOVERNOR:

Same as Department – no additional core changes

HOUSE:

Same as Department – no additional core changes

SENATE:

Same as Department – no additional core changes

CONFERENCE:

Same as Department – no additional core changes

Dept Of Social Services														
	FY25 Budget Amount*	FY25 Budget FTE*	FY26 Department Request	FY26 Department Request FTE	FY26 Governor Recommended as Amended	FY26 Governor Recommended as Amended FTE	FY26 House Recommended	FY26 House Recommended FTE	FY26 Senate Recommended	FY26 Senate Recommended FTE	FY26 Truly Agreed Finally Passed	FY26 Truly Agreed Finally Passed FTE	FY26 TAFP After VETO Action	FY26 TAFP After VETO Action FTE
Section 11.773														
Phelps Health Emergency Room - 830369B														
Core														
General Revenue	5,000,000	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
Program-Specific	5,000,000	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
Total	\$5,000,000	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00
Total - Phelps Health Emergency Room	\$5,000,000	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00

*Does not include Supplementals.

DEPARTMENT OF SOCIAL SERVICES

Section 11.775 – MO HealthNet Division – Managed Care Specialty Plan

Book 8, Page 1525

Description: This item funds health care services, behavioral health services, and care management and coordination to children in the care and custody of the State of Missouri; children who receive adoption or legal guardianship subsidy assistance; and individuals under the age of 26 who were in foster care on their 18th birthday and were covered by MO HealthNet. This item also funds individuals who were covered by Medicaid from another state, but are not eligible for Medicaid coverage under another mandatory coverage group.

Legal Base: State Statute: Section 208.166, RSMo.; Federal Law: Social Security Act Sections 1902 (a) (4), 1915 (b) and 1115; Federal Regulation: 42 CFR, Part 438

Funding Sources: General Revenue (1101), Title XIX-Federal Fund (1163), Federal Reimbursement Allowance Fund (1142), and Ambulance Service Reimbursement Allowance Fund (1958)

FY 2025 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

Core reduction: (\$6,571,956) GR PSD reduction due to estimated lapse

GOVERNOR:

Core reduction: (\$3,807,439) GR PSD reduction due to change in the Federal Medical Assistance Percentage (FMAP) rate – see New Decision Item

HOUSE:

Core reduction: (\$13,203,034) (GR \$10,107,726 and FED \$3,095,308 PSD) reduction based on January end-of-month (EOM) projections

SENATE:

Same as House – no additional core changes

CONFERENCE:

Same as House – no additional core changes

Dept Of Social Services														
	FY25 Budget Amount*	FY25 Budget FTE*	FY26 Department Request	FY26 Department Request FTE	FY26 Governor Recommended as Amended	FY26 Governor Recommended as Amended FTE	FY26 House Recommended	FY26 House Recommended FTE	FY26 Senate Recommended	FY26 Senate Recommended FTE	FY26 Truly Agreed Finally Passed	FY26 Truly Agreed Finally Passed FTE	FY26 TAFP After VETO Action	FY26 TAFP After VETO Action FTE
Section 11.775														
Managed Care Specialty Plan - 830231B														
Core														
General Revenue	133,372,192	0.00	126,800,236	0.00	122,992,797	0.00	112,885,071	0.00	112,885,071	0.00	112,885,071	0.00	112,885,071	0.00
Program-Specific	133,372,192	0.00	126,800,236	0.00	122,992,797	0.00	112,885,071	0.00	112,885,071	0.00	112,885,071	0.00	112,885,071	0.00
Federal Funds	208,328,840	0.00	208,328,840	0.00	208,328,840	0.00	205,233,532	0.00	205,233,532	0.00	205,233,532	0.00	205,233,532	0.00
Program-Specific	208,328,840	0.00	208,328,840	0.00	208,328,840	0.00	205,233,532	0.00	205,233,532	0.00	205,233,532	0.00	205,233,532	0.00
Other Funds	21,402,611	0.00	21,402,611	0.00	21,402,611	0.00	21,402,611	0.00	21,402,611	0.00	21,402,611	0.00	21,402,611	0.00
Program-Specific	21,402,611	0.00	21,402,611	0.00	21,402,611	0.00	21,402,611	0.00	21,402,611	0.00	21,402,611	0.00	21,402,611	0.00
Total	\$363,103,643	0.00	\$356,531,687	0.00	\$352,724,248	0.00	\$339,521,214	0.00	\$339,521,214	0.00	\$339,521,214	0.00	\$339,521,214	0.00
MC Actuarial Increase - NOP.83B.006														
General Revenue	0	0.00	9,427,159	0.00	9,556,267	0.00	0	0.00	9,556,267	0.00	9,556,267	0.00	9,556,267	0.00
Program-Specific	0	0.00	9,427,159	0.00	9,556,267	0.00	0	0.00	9,556,267	0.00	9,556,267	0.00	9,556,267	0.00
Federal Funds	0	0.00	12,932,592	0.00	12,803,484	0.00	0	0.00	12,803,484	0.00	12,803,484	0.00	12,803,484	0.00
Program-Specific	0	0.00	12,932,592	0.00	12,803,484	0.00	0	0.00	12,803,484	0.00	12,803,484	0.00	12,803,484	0.00
Total	\$0	0.00	\$22,359,751	0.00	\$22,359,751	0.00	\$0	0.00	\$22,359,751	0.00	\$22,359,751	0.00	\$22,359,751	0.00
This NDI is needed to fund an increase for managed care medical services, including the Managed Care, Adult Expansion Group (AEG), Managed Care Specialty Plan, CHIP, and Show Me Healthy Babies (SMHB) populations. The FY26 rates are based on an estimated budget trend developed utilizing actuarial standards which consider historical trends in utilization and inflation, budget and legislative changes, and federal requirements.														
MO HealthNet needs to maintain capitation rates at a sufficient level to ensure continued health plan and provider participation. The Federal Authority is Social Security Act Section 1915(b) and 1115 Waiver. The Federal Regulation is 42 CFR 438-Managed Care, and the State Authority is Section 208.166, RSMo. Final federal rules and regulations published June 14, 2002, effective August 13, 2003, require that capitation payments made on behalf of managed care participants be actuarially sound. Further, the state must provide the actuarial certification of the capitation rates to the CMS. The CMS Regional Office must review and approve all contracts for managed care as a condition for federal financial participation.														
MO HealthNet Cost to Continue - NOP.83B.032														
Federal Funds	0	0.00	23,485,014	0.00	7,861,848	0.00	0	0.00	0	0.00	0	0.00	0	0.00
Program-Specific	0	0.00	23,485,014	0.00	7,861,848	0.00	0	0.00	0	0.00	0	0.00	0	0.00
Total	\$0	0.00	\$23,485,014	0.00	\$7,861,848	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00
Funds are requested for estimated costs in the FY 2025 budget. These amounts are based on actual MO HealthNet program expenditures through November 2024 and historical trends. It is anticipated that additional funding will be necessary to operate current MO HealthNet programs for Fiscal Year 2026. Programs with estimated shortfalls are listed below.														
FMAP Adjustment - SWO.GV.001														
Federal Funds	0	0.00	0	0.00	3,807,439	0.00	3,807,439	0.00	3,807,439	0.00	3,807,439	0.00	3,807,439	0.00
Program-Specific	0	0.00	0	0.00	3,807,439	0.00	3,807,439	0.00	3,807,439	0.00	3,807,439	0.00	3,807,439	0.00
Total	\$0	0.00	\$0	0.00	\$3,807,439	0.00	\$3,807,439	0.00	\$3,807,439	0.00	\$3,807,439	0.00	\$3,807,439	0.00
This funding is requested to compensate for the change in the Federal Medical Assistance Percentage (FMAP). Each year the Centers for Medicare and Medicaid Services (CMS) revises the percentage of Medicaid costs the federal government will reimburse to each state. FMAP varies by state and is based on criteria such as per capita income. Effective October 1, 2025, the blended FMAP rate will decrease from 65.500% to 64.658%. The enhanced FMAP rate for the CHIP children and the Women with Breast or Cervical Cancer program will decrease from 75.853% to 75.263%. This change will result in a net cost shift from Federal to GR funds for the Departments of Mental Health, Health and Senior Services, and Social Services. In order to realign the federal match, the Governor recommended an NDI for additional general revenue authority as well as corresponding core reductions in federal authority.														
The Federal Authority is Social Security Act 1905(b).														
Total - Managed Care Specialty Plan	\$363,103,643	0.00	\$402,376,452	0.00	\$386,753,286	0.00	\$343,328,653	0.00	\$365,688,404	0.00	\$365,688,404	0.00	\$365,688,404	0.00

*Does not include Supplementals.

DEPARTMENT OF SOCIAL SERVICES

Section 11.775 cont. – MO HealthNet Division – Managed Care Specialty Plan – Public Ground Emergency Medical Transportation Services

Book 8, Page 1532

Description: This funding is for payments to providers of public ground emergency medical transportation (GEMT) when providing services to persons paid for under this section.

Legal Base: State Statute: Sections 208.1030 and 208.1032, RSMo.

Funding Sources: Title XIX-Federal Fund (1163) and Ground Emergency Medical Transportation Fund (1422)

FY 2025 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

No core changes

GOVERNOR:

No core changes

HOUSE:

No core changes

SENATE:

No core changes

CONFERENCE:

No core changes

Dept Of Social Services														
	FY25 Budget Amount*	FY25 Budget FTE*	FY26 Department Request	FY26 Department Request FTE	FY26 Governor Recommended as Amended	FY26 Governor Recommended as Amended FTE	FY26 House Recommended	FY26 House Recommended FTE	FY26 Senate Recommended	FY26 Senate Recommended FTE	FY26 Truly Agreed Finally Passed	FY26 Truly Agreed Finally Passed FTE	FY26 TAFP After VETO Action	FY26 TAFP After VETO Action FTE
Section 11.775														
Mc Specialty Plan Public Gemt - 830368B														
Core														
Federal Funds	1,760,313	0.00	1,760,313	0.00	1,760,313	0.00	1,760,313	0.00	1,760,313	0.00	1,760,313	0.00	1,760,313	0.00
Program-Specific	1,760,313	0.00	1,760,313	0.00	1,760,313	0.00	1,760,313	0.00	1,760,313	0.00	1,760,313	0.00	1,760,313	0.00
Other Funds	927,188	0.00	927,188	0.00	927,188	0.00	927,188	0.00	927,188	0.00	927,188	0.00	927,188	0.00
Program-Specific	927,188	0.00	927,188	0.00	927,188	0.00	927,188	0.00	927,188	0.00	927,188	0.00	927,188	0.00
Total	\$2,687,501	0.00	\$2,687,501	0.00	\$2,687,501	0.00	\$2,687,501	0.00	\$2,687,501	0.00	\$2,687,501	0.00	\$2,687,501	0.00
Total - Mc Specialty Plan Public Gemt	\$2,687,501	0.00	\$2,687,501	0.00	\$2,687,501	0.00	\$2,687,501	0.00	\$2,687,501	0.00	\$2,687,501	0.00	\$2,687,501	0.00

*Does not include Supplementals.

DEPARTMENT OF SOCIAL SERVICES
Section 11.780 – MO HealthNet Division – Hospital Services

Book 8, Page 1537

Description: The MO HealthNet Division (MHD) reimburses for inpatient and outpatient hospital services for fee-for-service participants. These services are mandatory Medicaid-covered services and are provided statewide. Inpatient hospital services are medical services provided in a hospital acute or psychiatric care setting for the care and treatment of MO HealthNet participants. Outpatient hospital services include preventive, diagnostic, emergency, therapeutic, rehabilitative, or palliative services provided in an outpatient setting. The listing from DHSS dated 7/2/2024 lists a total of 167 licensed hospitals which includes 25 additional campus locations and 1 Rural Emergency Hospital, and 6 hospitals that are Psychiatric Residential Treatment Facilities (PRTF).

Legal Base: State Statute: Sections 208.152 and 208.153, RSMo.; Federal Law: Social Security Act Sections 1905(a) (1) and (2), 1923(a)-(f); Federal Regulation: 42 CFR 440.10 and 440.20

Funding Sources: General Revenue (1101), Title XIX-Federal Fund (1163), Federal Reimbursement Allowance Fund (1142), Pharmacy Reimbursement Allowance Fund (1144), and Healthy Families Trust Fund (1625)

FY 2025 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:
No core changes

GOVERNOR:
Core reduction: (\$661,701) FED PSD reduction due to change in the Federal Medical Assistance Percentage (FMAP) rate – see New Decision Item

HOUSE:
Core reduction: (\$66,975,099) (GR \$13,806,645 and FED \$53,168,454 PSD) reduction based on January end-of-month (EOM) projections

SENATE:
Same as House – no additional core changes

CONFERENCE:
Same as House – no additional core changes

Dept Of Social Services														
	FY25 Budget Amount*	FY25 Budget FTE*	FY26 Department Request	FY26 Department Request FTE	FY26 Governor Recommended as Amended	FY26 Governor Recommended as Amended FTE	FY26 House Recommended	FY26 House Recommended FTE	FY26 Senate Recommended	FY26 Senate Recommended FTE	FY26 Truly Agreed Finally Passed	FY26 Truly Agreed Finally Passed FTE	FY26 TAFP After VETO Action	FY26 TAFP After VETO Action FTE
Section 11.780														
Hospital Care - 830232B														
Core														
General Revenue	80,658,983	0.00	80,658,983	0.00	80,658,983	0.00	66,852,338	0.00	66,852,338	0.00	66,852,338	0.00	66,852,338	0.00
Program-Specific	80,658,983	0.00	80,658,983	0.00	80,658,983	0.00	66,852,338	0.00	66,852,338	0.00	66,852,338	0.00	66,852,338	0.00
Federal Funds	409,224,747	0.00	409,224,747	0.00	408,563,046	0.00	355,394,592	0.00	355,394,592	0.00	355,394,592	0.00	355,394,592	0.00
Expense & Equipment	215,000	0.00	215,000	0.00	215,000	0.00	215,000	0.00	215,000	0.00	215,000	0.00	215,000	0.00
Program-Specific	409,009,747	0.00	409,009,747	0.00	408,348,046	0.00	355,179,592	0.00	355,179,592	0.00	355,179,592	0.00	355,179,592	0.00
Other Funds	143,512,446	0.00	143,512,446	0.00	143,512,446	0.00	143,512,446	0.00	143,512,446	0.00	143,512,446	0.00	143,512,446	0.00
Expense & Equipment	215,000	0.00	215,000	0.00	215,000	0.00	215,000	0.00	215,000	0.00	215,000	0.00	215,000	0.00
Program-Specific	143,297,446	0.00	143,297,446	0.00	143,297,446	0.00	143,297,446	0.00	143,297,446	0.00	143,297,446	0.00	143,297,446	0.00
Total	\$633,396,176	0.00	\$633,396,176	0.00	\$632,734,475	0.00	\$565,759,376	0.00	\$565,759,376	0.00	\$565,759,376	0.00	\$565,759,376	0.00
OPFS Trend - NOP.83B.018														
General Revenue	0	0.00	4,423,118	0.00	4,506,251	0.00	2,703,751	0.00	2,703,751	0.00	2,703,751	0.00	2,703,751	0.00
Program-Specific	0	0.00	4,423,118	0.00	4,506,251	0.00	2,703,751	0.00	2,703,751	0.00	2,703,751	0.00	2,703,751	0.00
Federal Funds	0	0.00	8,327,295	0.00	8,244,162	0.00	4,946,497	0.00	4,946,497	0.00	4,946,497	0.00	4,946,497	0.00
Program-Specific	0	0.00	8,327,295	0.00	8,244,162	0.00	4,946,497	0.00	4,946,497	0.00	4,946,497	0.00	4,946,497	0.00
Total	\$0	0.00	\$12,750,413	0.00	\$12,750,413	0.00	\$7,650,248	0.00	\$7,650,248	0.00	\$7,650,248	0.00	\$7,650,248	0.00
The MO HealthNet Division (MHD) outpatient regulation (13 CSR 70-15.160) explains that outpatient hospital services shall be reimbursed on a predetermined Fee-for-Service basis using an Outpatient Simplified Fee Schedule (OSFS) based on the Ambulatory Payment Classifications (APC) groups and fees under the Medicare Hospital Outpatient Prospective Payment System (OPPS). MHD is projecting an increase to the Medicare OPPS payment rates by five percent for SFY 2026.														
MO HealthNet Cost to Continue - NOP.83B.032														
General Revenue	0	0.00	3,786,772	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
Program-Specific	0	0.00	3,786,772	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
Federal Funds	0	0.00	17,195,928	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
Program-Specific	0	0.00	17,195,928	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
Total	\$0	0.00	\$20,982,700	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00
Funds are requested for estimated costs in the FY 2025 budget. These amounts are based on actual MO HealthNet program expenditures through November 2024 and historical trends. It is anticipated that additional funding will be necessary to operate current MO HealthNet programs for Fiscal Year 2026. Programs with estimated shortfalls are listed below.														
FMAP Adjustment - SWO.GV.001														
General Revenue	0	0.00	0	0.00	661,701	0.00	661,701	0.00	661,701	0.00	661,701	0.00	661,701	0.00
Program-Specific	0	0.00	0	0.00	661,701	0.00	661,701	0.00	661,701	0.00	661,701	0.00	661,701	0.00
Total	\$0	0.00	\$0	0.00	\$661,701	0.00	\$661,701	0.00	\$661,701	0.00	\$661,701	0.00	\$661,701	0.00
This funding is requested to compensate for the change in the Federal Medical Assistance Percentage (FMAP). Each year the Centers for Medicare and Medicaid Services (CMS) revises the percentage of Medicaid costs the federal government will reimburse to each state. FMAP varies by state and is based on criteria such as per capita income. Effective October 1, 2025, the blended FMAP rate will decrease from 65.500% to 64.658%. The enhanced FMAP rate for the CHIP children and the Women with Breast or Cervical Cancer program will decrease from 75.853% to 75.263%. This change will result in a net cost shift from Federal to GR funds for the Departments of Mental Health, Health and Senior Services, and Social Services. In order to realign the federal match, the Governor recommended an NDI for additional general revenue authority as well as corresponding core reductions in federal authority.														
The Federal Authority is Social Security Act 1905(b).														
Total - Hospital Care	\$633,396,176	0.00	\$667,129,289	0.00	\$646,146,589	0.00	\$574,071,325	0.00	\$574,071,325	0.00	\$574,071,325	0.00	\$574,071,325	0.00

DEPARTMENT OF SOCIAL SERVICES

Section 11.785 – MO HealthNet Division – Transformation of Rural Community Health (ToRCH)

Book 8, Page 1554

Description: This section provides funding focused on getting six rural hospitals in Missouri operational as a Rural Hospital Health Hub. Funding will be based on the size of the hospital and community they serve. This project will utilize a community information exchange platform to track referrals for social determinants of health and the closed-loop outcome. The platform will track the activity and behaviors of the hospital, participant, community organizations, and financials. These hubs will be for proactive treatment that reduces reactive treatment in-house at the hospitals.

Legal Base: HB 11

Funding Sources: General Revenue (1101), Title XIX-Federal Fund (1163), and Federal Reimbursement Allowance Fund (1142)

FY 2025 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

No core changes

GOVERNOR:

No core changes

HOUSE:

No core changes

SENATE:

No core changes

CONFERENCE:

No core changes

Dept Of Social Services														
	FY25 Budget Amount*	FY25 Budget FTE*	FY26 Department Request	FY26 Department Request FTE	FY26 Governor Recommended as Amended	FY26 Governor Recommended as Amended FTE	FY26 House Recommended	FY26 House Recommended FTE	FY26 Senate Recommended	FY26 Senate Recommended FTE	FY26 Truly Agreed Finally Passed	FY26 Truly Agreed Finally Passed FTE	FY26 TAFP After VETO Action	FY26 TAFP After VETO Action FTE
Section 11.785														
Torch Rural Hospital Hlth Hub - 830312B														
Core														
General Revenue	3,750,000	0.00	3,750,000	0.00	3,750,000	0.00	3,750,000	0.00	3,750,000	0.00	3,750,000	0.00	3,750,000	0.00
Expense & Equipment	3,750,000	0.00	3,750,000	0.00	3,750,000	0.00	3,750,000	0.00	3,750,000	0.00	3,750,000	0.00	3,750,000	0.00
Federal Funds	7,500,000	0.00	7,500,000	0.00	7,500,000	0.00	7,500,000	0.00	7,500,000	0.00	7,500,000	0.00	7,500,000	0.00
Expense & Equipment	7,500,000	0.00	7,500,000	0.00	7,500,000	0.00	7,500,000	0.00	7,500,000	0.00	7,500,000	0.00	7,500,000	0.00
Other Funds	3,750,000	0.00	3,750,000	0.00	3,750,000	0.00	3,750,000	0.00	3,750,000	0.00	3,750,000	0.00	3,750,000	0.00
Expense & Equipment	3,750,000	0.00	3,750,000	0.00	3,750,000	0.00	3,750,000	0.00	3,750,000	0.00	3,750,000	0.00	3,750,000	0.00
Total	\$15,000,000	0.00	\$15,000,000	0.00	\$15,000,000	0.00	\$15,000,000	0.00	\$15,000,000	0.00	\$15,000,000	0.00	\$15,000,000	0.00
Total - Torch Rural Hospital Hlth Hub	\$15,000,000	0.00	\$15,000,000	0.00	\$15,000,000	0.00	\$15,000,000	0.00	\$15,000,000	0.00	\$15,000,000	0.00	\$15,000,000	0.00

*Does not include Supplementals.

DEPARTMENT OF SOCIAL SERVICES

Section 11.790 – MO HealthNet Divisions – Physician Payments for Safety Net Hospitals

Book 8, Page 1559

Description: This program provides enhanced physician reimbursement payments for services provided to MO HealthNet participants by certain hospitals designated as safety net hospitals. Services provided by physicians, dentists, podiatrists, nurse practitioners, physician assistants, nurse midwives, optometrists, audiologists, psychologists, and certified registered nurse anesthetists/anesthesiologist assistants not employed by the state who are actively engaged in the training of physicians when the training takes place in a safety net hospital are also eligible for enhanced physician payments. There are three entities that currently qualify for the additional physician payments – 1) University Health Truman Medical Center, 2) University of Missouri Kansas City and 3) University Health Lakewood Medical Center. This program was established in July 2001 to provide a mechanism to fund enhanced payments to these safety net hospitals who traditionally see a high volume of Medicaid and uninsured patients.

Legal Base: State Statute: Sections 208.152 and 208.153, RSMo.; Federal Law: Social Security Act Sections 1905(a) (1) and (2), 1923(a)-(f); Federal Regulation: 42 CFR 440.10 and 440.20

Funding Sources: Title XIX-Federal Fund (1163) and Department of Social Services Intergovernmental Transfer Fund (1139)

FY 2025 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:
No core changes

GOVERNOR:
No core changes

HOUSE:
No core changes

SENATE:
No core changes

CONFERENCE:
No core changes

Dept Of Social Services														
	FY25 Budget Amount*	FY25 Budget FTE*	FY26 Department Request	FY26 Department Request FTE	FY26 Governor Recommended as Amended	FY26 Governor Recommended as Amended FTE	FY26 House Recommended	FY26 House Recommended FTE	FY26 Senate Recommended	FY26 Senate Recommended FTE	FY26 Truly Agreed Finally Passed	FY26 Truly Agreed Finally Passed FTE	FY26 TAFP After VETO Action	FY26 TAFP After VETO Action FTE
Section 11.790														
Physician Payments Safety Net - 830234B														
Core														
Federal Funds	17,613,590	0.00	17,613,590	0.00	17,613,590	0.00	17,613,590	0.00	17,613,590	0.00	17,613,590	0.00	17,613,590	0.00
Program-Specific	17,613,590	0.00	17,613,590	0.00	17,613,590	0.00	17,613,590	0.00	17,613,590	0.00	17,613,590	0.00	17,613,590	0.00
Other Funds	1,709,202	0.00	1,709,202	0.00	1,709,202	0.00	1,709,202	0.00	1,709,202	0.00	1,709,202	0.00	1,709,202	0.00
Program-Specific	1,709,202	0.00	1,709,202	0.00	1,709,202	0.00	1,709,202	0.00	1,709,202	0.00	1,709,202	0.00	1,709,202	0.00
Total	\$19,322,792	0.00	\$19,322,792	0.00	\$19,322,792	0.00	\$19,322,792	0.00	\$19,322,792	0.00	\$19,322,792	0.00	\$19,322,792	0.00
Total - Physician Payments Safety Net	\$19,322,792	0.00	\$19,322,792	0.00	\$19,322,792	0.00	\$19,322,792	0.00	\$19,322,792	0.00	\$19,322,792	0.00	\$19,322,792	0.00

*Does not include Supplementals.

DEPARTMENT OF SOCIAL SERVICES

Section 11.793 – MO HealthNet Divisions – Indirect Medical Education (IME)-University Health

N/A

Description: This funding is for indirect medial education (IME) payments to public acute care safety net hospitals who serve as primary teaching hospitals – University of Missouri-Colombia School of Medicine and University of Missouri-Kansas City School of Medicine. Payments from this section are for the difference between IME payments paid under the Diagnosis-Related Group (DRG) methodology and 100% of allowable funds.

Legal Base: HB 11

Funding Sources: Title XIX-Federal Fund (1163) and Department of Social Services Intergovernmental Transfer Fund (1139)

FY 2025 GR W/H: N/A

CORE ADJUSTMENTS:

DEPARTMENT:

New Decision Item – recommended by the Senate

GOVERNOR:

New Decision Item – recommended by the Senate

HOUSE:

New Decision Item – recommended by the Senate

SENATE:

New Decision Item: \$19,709,102 (FED \$12,743,511 and OTH \$6,965,591 PSD)

CONFERENCE:

Same as Senate – no additional changes

Dept Of Social Services														
	FY25 Budget Amount*	FY25 Budget FTE*	FY26 Department Request	FY26 Department Request FTE	FY26 Governor Recommended as Amended	FY26 Governor Recommended as Amended FTE	FY26 House Recommended	FY26 House Recommended FTE	FY26 Senate Recommended	FY26 Senate Recommended FTE	FY26 Truly Agreed Finally Passed	FY26 Truly Agreed Finally Passed FTE	FY26 TAFP After VETO Action	FY26 TAFP After VETO Action FTE
Section 11.793														
Indirect Medical Education-University Health - 830446B														
Indirect Med Education - NOP.SN.203														
Federal Funds	0	0.00	0	0.00	0	0.00	0	0.00	12,743,511	0.00	12,743,511	0.00	12,743,511	0.00
Program-Specific	0	0.00	0	0.00	0	0.00	0	0.00	12,743,511	0.00	12,743,511	0.00	12,743,511	0.00
Other Funds	0	0.00	0	0.00	0	0.00	0	0.00	6,965,591	0.00	6,965,591	0.00	6,965,591	0.00
Program-Specific	0	0.00	0	0.00	0	0.00	0	0.00	6,965,591	0.00	6,965,591	0.00	6,965,591	0.00
Total	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$19,709,102	0.00	\$19,709,102	0.00	\$19,709,102	0.00
Total - Indirect Medical Education-University Health	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$19,709,102	0.00	\$19,709,102	0.00	\$19,709,102	0.00

*Does not include Supplementals.

DEPARTMENT OF SOCIAL SERVICES

Section 11.795 – MO HealthNet Divisions – Federally Qualified Health Centers (FQHCs) Distribution

Book 8, Page 1564

Description: This section provides funding for Federally Qualified Health Centers (FQHCs) services provided to fee-for-service MO HealthNet participants and Health Home payments. This core request provides state grants to assist FQHCs with infrastructure, equipment and personnel development so the uninsured and underinsured population will have increased access to health care, especially in medically underserved areas. These funds address gaps in preventive services and management of chronic conditions and incentive payments.

Legal Base: State Statute: Sections 208.152 and 208.201, RSMo.; Federal Law: Social Security Act Section 1903 (a); Federal Regulation: 42 CFR, Part 433.15

Funding Sources: General Revenue (1101) and Department of Social Services Federal Fund (1610)

FY 2025 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:
No core changes

GOVERNOR:
No core changes

HOUSE:
No core changes

SENATE:
No core changes

CONFERENCE:
No core changes

Dept Of Social Services														
	FY25 Budget Amount*	FY25 Budget FTE*	FY26 Department Request	FY26 Department Request FTE	FY26 Governor Recommended as Amended	FY26 Governor Recommended as Amended FTE	FY26 House Recommended	FY26 House Recommended FTE	FY26 Senate Recommended	FY26 Senate Recommended FTE	FY26 Truly Agreed Finally Passed	FY26 Truly Agreed Finally Passed FTE	FY26 TAFP After VETO Action	FY26 TAFP After VETO Action FTE
Section 11.795														
Fqhc Distribution - 830235B														
Core														
General Revenue	2,757,732	0.00	2,757,732	0.00	2,757,732	0.00	2,757,732	0.00	2,757,732	0.00	2,757,732	0.00	2,757,732	0.00
Program-Specific	2,757,732	0.00	2,757,732	0.00	2,757,732	0.00	2,757,732	0.00	2,757,732	0.00	2,757,732	0.00	2,757,732	0.00
Federal Funds	2,500,000	0.00	2,500,000	0.00	2,500,000	0.00	2,500,000	0.00	2,500,000	0.00	2,500,000	0.00	2,500,000	0.00
Program-Specific	2,500,000	0.00	2,500,000	0.00	2,500,000	0.00	2,500,000	0.00	2,500,000	0.00	2,500,000	0.00	2,500,000	0.00
Total	\$5,257,732	0.00	\$5,257,732	0.00	\$5,257,732	0.00	\$5,257,732	0.00	\$5,257,732	0.00	\$5,257,732	0.00	\$5,257,732	0.00
FQHC Physician Scholarships - NOP.HS.107														
General Revenue	0	0.00	0	0.00	0	0.00	500,000	0.00	500,000	0.00	500,000	0.00	500,000	0.00
Program-Specific	0	0.00	0	0.00	0	0.00	500,000	0.00	500,000	0.00	500,000	0.00	500,000	0.00
Total	\$0	0.00	\$0	0.00	\$0	0.00	\$500,000	0.00	\$500,000	0.00	\$500,000	0.00	\$500,000	0.00
Total - Fqhc Distribution	\$5,257,732	0.00	\$5,257,732	0.00	\$5,257,732	0.00	\$5,757,732	0.00	\$5,757,732	0.00	\$5,757,732	0.00	\$5,757,732	0.00

*Does not include Supplementals.

DEPARTMENT OF SOCIAL SERVICES

Section 11.795 cont. – MO HealthNet Division – Women and Minority Health Care Outreach

Book 8, Page 1569

Description: This item provides state grants to assist Federally Qualified Health Center (FQHCs) for fee-for-service MO HealthNet participants to establish and implement healthcare outreach programs from women and minorities. Funds are distributed to 22 FQHCs, statewide.

Legal Base: State Statute: Sections 208.152 and 208.201, RSMo.; Federal Law: Social Security Act Section 1903 (a); Federal Regulation: 42 CFR, Part 433.15

Funding Sources: General Revenue (1101) and Department of Social Services Federal Fund (1610)

FY 2025 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

No core changes

GOVERNOR:

No core changes

HOUSE:

No core changes

SENATE:

No core changes

CONFERENCE:

No core changes

Dept Of Social Services														
	FY25 Budget Amount*	FY25 Budget FTE*	FY26 Department Request	FY26 Department Request FTE	FY26 Governor Recommended as Amended	FY26 Governor Recommended as Amended FTE	FY26 House Recommended	FY26 House Recommended FTE	FY26 Senate Recommended	FY26 Senate Recommended FTE	FY26 Truly Agreed Finally Passed	FY26 Truly Agreed Finally Passed FTE	FY26 TAFP After VETO Action	FY26 TAFP After VETO Action FTE
Section 11.795														
Women & Minority Outreach - 830236B														
Core														
General Revenue	2,029,796	0.00	2,029,796	0.00	2,029,796	0.00	2,029,796	0.00	2,029,796	0.00	2,029,796	0.00	2,029,796	0.00
Expense & Equipment	2,029,796	0.00	2,029,796	0.00	2,029,796	0.00	2,029,796	0.00	2,029,796	0.00	2,029,796	0.00	2,029,796	0.00
Federal Funds	2,029,796	0.00	2,029,796	0.00	2,029,796	0.00	2,029,796	0.00	2,029,796	0.00	2,029,796	0.00	2,029,796	0.00
Expense & Equipment	2,029,796	0.00	2,029,796	0.00	2,029,796	0.00	2,029,796	0.00	2,029,796	0.00	2,029,796	0.00	2,029,796	0.00
Total	\$4,059,592	0.00	\$4,059,592	0.00	\$4,059,592	0.00	\$4,059,592	0.00	\$4,059,592	0.00	\$4,059,592	0.00	\$4,059,592	0.00
Total - Women & Minority Outreach	\$4,059,592	0.00	\$4,059,592	0.00	\$4,059,592	0.00	\$4,059,592	0.00	\$4,059,592	0.00	\$4,059,592	0.00	\$4,059,592	0.00

*Does not include Supplementals.

DEPARTMENT OF SOCIAL SERVICES

Section 11.800 – MO HealthNet Division – Substance Abuse Prevention Network – Jordan Valley

Book 8, Page 1574

Description: This section distributes funds to strengthen and expand substance use prevention, treatment, and recovery services by utilizing a community-based approach for a Federally Qualified Health Center (FQHC) – Jordan Valley Community Health Center in Springfield. This approach would address social determinants of health, provide medication for opioid use disorder and work with housing resources to help ensure individuals have access to safe housing.

Legal Base: State Statute: Sections 208.152 and 208.201, RSMo.; Federal Law: Social Security Act Section 1903 (a); Federal Regulation: 42 CFR, Part 433.15

Funding Sources: General Revenue (1101), Department of Social Services Federal Fund (1610), and Opioid Addition Treatment and Recovery Fund (1705)

FY 2025 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:
No core changes

GOVERNOR:
No core changes

HOUSE:
No core changes

SENATE:
No core changes

CONFERENCE:
No core changes

Dept Of Social Services														
	FY25 Budget Amount*	FY25 Budget FTE*	FY26 Department Request	FY26 Department Request FTE	FY26 Governor Recommended as Amended	FY26 Governor Recommended as Amended FTE	FY26 House Recommended	FY26 House Recommended FTE	FY26 Senate Recommended	FY26 Senate Recommended FTE	FY26 Truly Agreed Finally Passed	FY26 Truly Agreed Finally Passed FTE	FY26 TAFP After VETO Action	FY26 TAFP After VETO Action FTE
Section 11.800														
Sbstnc Abs Prev-Jrdn Valley - 830316B														
Core														
General Revenue	1,000,000	0.00	1,000,000	0.00	1,000,000	0.00	1,000,000	0.00	1,000,000	0.00	1,000,000	0.00	1,000,000	0.00
Expense & Equipment	1,000,000	0.00	1,000,000	0.00	1,000,000	0.00	1,000,000	0.00	1,000,000	0.00	1,000,000	0.00	1,000,000	0.00
Federal Funds	250,000	0.00	250,000	0.00	250,000	0.00	250,000	0.00	250,000	0.00	250,000	0.00	250,000	0.00
Expense & Equipment	250,000	0.00	250,000	0.00	250,000	0.00	250,000	0.00	250,000	0.00	250,000	0.00	250,000	0.00
Other Funds	1,100,000	0.00	1,100,000	0.00	1,100,000	0.00	1,100,000	0.00	1,100,000	0.00	1,100,000	0.00	1,100,000	0.00
Expense & Equipment	1,100,000	0.00	1,100,000	0.00	1,100,000	0.00	1,100,000	0.00	1,100,000	0.00	1,100,000	0.00	1,100,000	0.00
Total	\$2,350,000	0.00	\$2,350,000	0.00	\$2,350,000	0.00	\$2,350,000	0.00	\$2,350,000	0.00	\$2,350,000	0.00	\$2,350,000	0.00
Total - Sbstnc Abs Prev-Jrdn Valley	\$2,350,000	0.00	\$2,350,000	0.00	\$2,350,000	0.00	\$2,350,000	0.00	\$2,350,000	0.00	\$2,350,000	0.00	\$2,350,000	0.00

*Does not include Supplementals.

DEPARTMENT OF SOCIAL SERVICES

Section 11.800 cont. – MO HealthNet Division – Substance Abuse Prevention Network

Book 8, Page 1579

Description: This section distributes funds to strengthen and expand substance use prevention, treatment, and recovery services by utilizing a community-based approach. This approach would address social determinants of health, provide medication for opioid use disorder and work with housing resources to help ensure individuals have access to safe housing.

Legal Base: State Statute: Sections 208.152 and 208.201, RSMo.; Federal Law: Social Security Act Section 1903 (a); Federal Regulation: 42 CFR, Part 433.15

Funding Sources: General Revenue (1101), Department of Social Services Federal Fund (1610) and Opioid Addition Treatment and Recovery Fund (1705)

FY 2025 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

No core changes

GOVERNOR:

No core changes

HOUSE:

No core changes

SENATE:

No core changes

CONFERENCE:

No core changes

Dept Of Social Services														
	FY25 Budget Amount*	FY25 Budget FTE*	FY26 Department Request	FY26 Department Request FTE	FY26 Governor Recommended as Amended	FY26 Governor Recommended as Amended FTE	FY26 House Recommended	FY26 House Recommended FTE	FY26 Senate Recommended	FY26 Senate Recommended FTE	FY26 Truly Agreed Finally Passed	FY26 Truly Agreed Finally Passed FTE	FY26 TAFP After VETO Action	FY26 TAFP After VETO Action FTE
Section 11.800														
Substance Abuse Prev Network - 830317B														
Core														
General Revenue	1,000,000	0.00	1,000,000	0.00	1,000,000	0.00	1,000,000	0.00	1,000,000	0.00	1,000,000	0.00	1,000,000	0.00
Expense & Equipment	1,000,000	0.00	1,000,000	0.00	1,000,000	0.00	1,000,000	0.00	1,000,000	0.00	1,000,000	0.00	1,000,000	0.00
Federal Funds	250,000	0.00	250,000	0.00	250,000	0.00	250,000	0.00	250,000	0.00	250,000	0.00	250,000	0.00
Expense & Equipment	250,000	0.00	250,000	0.00	250,000	0.00	250,000	0.00	250,000	0.00	250,000	0.00	250,000	0.00
Other Funds	2,100,000	0.00	2,100,000	0.00	2,100,000	0.00	2,100,000	0.00	2,100,000	0.00	2,100,000	0.00	2,100,000	0.00
Expense & Equipment	2,100,000	0.00	2,100,000	0.00	2,100,000	0.00	2,100,000	0.00	2,100,000	0.00	2,100,000	0.00	2,100,000	0.00
Total	\$3,350,000	0.00	\$3,350,000	0.00	\$3,350,000	0.00	\$3,350,000	0.00	\$3,350,000	0.00	\$3,350,000	0.00	\$3,350,000	0.00
Total - Substance Abuse Prev Network	\$3,350,000	0.00	\$3,350,000	0.00	\$3,350,000	0.00	\$3,350,000	0.00	\$3,350,000	0.00	\$3,350,000	0.00	\$3,350,000	0.00

*Does not include Supplementals.

DEPARTMENT OF SOCIAL SERVICES

Section 11.805 – MO HealthNet Divisions – FQHC Technical Assistance Contracts

Book 8, Page 1584

Description: This section provides funding to assist Federally Qualified Health Centers (FQHCs) with outreach and engagement of Medicaid beneficiaries assigned to FQHCs to address gaps in preventive services and management of chronic conditions, and for incentive payments.

Legal Base: Section 330 (1) or 330 (m) of the Public Health Services Act

Funding Sources: General Revenue (1101) and Department of Social Services Federal Fund (1610)

FY 2025 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

No core changes

GOVERNOR:

No core changes

HOUSE:

No core changes

SENATE:

No core changes

CONFERENCE:

No core changes

Dept Of Social Services														
	FY25 Budget Amount*	FY25 Budget FTE*	FY26 Department Request	FY26 Department Request FTE	FY26 Governor Recommended as Amended	FY26 Governor Recommended as Amended FTE	FY26 House Recommended	FY26 House Recommended FTE	FY26 Senate Recommended	FY26 Senate Recommended FTE	FY26 Truly Agreed Finally Passed	FY26 Truly Agreed Finally Passed FTE	FY26 TAFP After VETO Action	FY26 TAFP After VETO Action FTE
Section 11.805														
Technical Assistance Contracts - 830237B														
Core														
General Revenue	1,918,645	0.00	1,918,645	0.00	1,918,645	0.00	1,918,645	0.00	1,918,645	0.00	1,918,645	0.00	1,918,645	0.00
Program-Specific	1,918,645	0.00	1,918,645	0.00	1,918,645	0.00	1,918,645	0.00	1,918,645	0.00	1,918,645	0.00	1,918,645	0.00
Federal Funds	1,918,645	0.00	1,918,645	0.00	1,918,645	0.00	1,918,645	0.00	1,918,645	0.00	1,918,645	0.00	1,918,645	0.00
Program-Specific	1,918,645	0.00	1,918,645	0.00	1,918,645	0.00	1,918,645	0.00	1,918,645	0.00	1,918,645	0.00	1,918,645	0.00
Total	\$3,837,290	0.00	\$3,837,290	0.00	\$3,837,290	0.00	\$3,837,290	0.00	\$3,837,290	0.00	\$3,837,290	0.00	\$3,837,290	0.00
Total - Technical Assistance Contracts	\$3,837,290	0.00	\$3,837,290	0.00	\$3,837,290	0.00	\$3,837,290	0.00	\$3,837,290	0.00	\$3,837,290	0.00	\$3,837,290	0.00

*Does not include Supplementals.

DEPARTMENT OF SOCIAL SERVICES
Section 11.810 – MO HealthNet Division – Health Homes

Book 8, Page 1589

Description: MO HealthNet operates the Primary Care Health Home Program for participants diagnosed with two chronic conditions or diagnosed with one chronic condition and at-risk for development of a second. Clinical care management per member per month (PMPM) payments are made for the reimbursement of required contracted services, and the cost of staff primarily responsible for delivery of these specified health home services who are not covered by other MO HealthNet reimbursement methodologies. This core funds PMPM payments made to health homes.

Legal Base: Federal Law: ACA Section 2703; Section 1945 of Title XIX of the Social Security Act.

Funding Sources: General Revenue (1101), Title XIX-Federal Fund (1163), and Federal Reimbursement Allowance Fund (1142)

FY 2025 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:
No core changes

GOVERNOR:
Core reduction: (\$146,570) GR PSD reduction due to change in the Federal Medical Assistance Percentage (FMAP) rate – see New Decision Item

HOUSE:
Core reduction: (\$4,343,314) FED PSD reduction based on January end-of-month (EOM) projections

SENATE:
Same as House – no additional core changes

CONFERENCE:
Same as House – no additional core changes

Dept Of Social Services														
	FY25 Budget Amount*	FY25 Budget FTE*	FY26 Department Request	FY26 Department Request FTE	FY26 Governor Recommended as Amended	FY26 Governor Recommended as Amended FTE	FY26 House Recommended	FY26 House Recommended FTE	FY26 Senate Recommended	FY26 Senate Recommended FTE	FY26 Truly Agreed Finally Passed	FY26 Truly Agreed Finally Passed FTE	FY26 TAFP After VETO Action	FY26 TAFP After VETO Action FTE
Section 11.810														
Health Homes - 830238B														
Core														
General Revenue	4,225,313	0.00	4,225,313	0.00	4,078,743	0.00	4,078,743	0.00	4,078,743	0.00	4,078,743	0.00	4,078,743	0.00
Program-Specific	4,225,313	0.00	4,225,313	0.00	4,078,743	0.00	4,078,743	0.00	4,078,743	0.00	4,078,743	0.00	4,078,743	0.00
Federal Funds	18,342,697	0.00	18,342,697	0.00	18,342,697	0.00	13,999,383	0.00	13,999,383	0.00	13,999,383	0.00	13,999,383	0.00
Program-Specific	18,342,697	0.00	18,342,697	0.00	18,342,697	0.00	13,999,383	0.00	13,999,383	0.00	13,999,383	0.00	13,999,383	0.00
Other Funds	6,027,694	0.00	6,027,694	0.00	6,027,694	0.00	6,027,694	0.00	6,027,694	0.00	6,027,694	0.00	6,027,694	0.00
Program-Specific	6,027,694	0.00	6,027,694	0.00	6,027,694	0.00	6,027,694	0.00	6,027,694	0.00	6,027,694	0.00	6,027,694	0.00
Total	\$28,595,704	0.00	\$28,595,704	0.00	\$28,449,134	0.00	\$24,105,820	0.00	\$24,105,820	0.00	\$24,105,820	0.00	\$24,105,820	0.00
MO HealthNet Cost to Continue - NOP.83B.032														
General Revenue	0	0.00	1,203,228	0.00	647,125	0.00	158,629	0.00	158,629	0.00	158,629	0.00	158,629	0.00
Program-Specific	0	0.00	1,203,228	0.00	647,125	0.00	158,629	0.00	158,629	0.00	158,629	0.00	158,629	0.00
Federal Funds	0	0.00	2,234,967	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
Program-Specific	0	0.00	2,234,967	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
Total	\$0	0.00	\$3,438,195	0.00	\$647,125	0.00	\$158,629	0.00	\$158,629	0.00	\$158,629	0.00	\$158,629	0.00
Funds are requested for estimated costs in the FY 2025 budget. These amounts are based on actual MO HealthNet program expenditures through November 2024 and historical trends. It is anticipated that additional funding will be necessary to operate current MO HealthNet programs for Fiscal Year 2026. Programs with estimated shortfalls are listed below.														
Primary Care Health Home - NOP.GV.116														
General Revenue	0	0.00	0	0.00	1,905,372	0.00	1,905,372	0.00	1,905,372	0.00	1,905,372	0.00	1,905,372	0.00
Program-Specific	0	0.00	0	0.00	1,905,372	0.00	1,905,372	0.00	1,905,372	0.00	1,905,372	0.00	1,905,372	0.00
Federal Funds	0	0.00	0	0.00	7,098,983	0.00	7,098,983	0.00	7,098,983	0.00	7,098,983	0.00	7,098,983	0.00
Program-Specific	0	0.00	0	0.00	7,098,983	0.00	7,098,983	0.00	7,098,983	0.00	7,098,983	0.00	7,098,983	0.00
Other Funds	0	0.00	0	0.00	1,865,317	0.00	1,865,317	0.00	1,865,317	0.00	1,865,317	0.00	1,865,317	0.00
Program-Specific	0	0.00	0	0.00	1,865,317	0.00	1,865,317	0.00	1,865,317	0.00	1,865,317	0.00	1,865,317	0.00
Total	\$0	0.00	\$0	0.00	\$10,869,672	0.00	\$10,869,672	0.00	\$10,869,672	0.00	\$10,869,672	0.00	\$10,869,672	0.00
This New Decision Item provides funding to support higher staffing levels of Community Health Worker (CHW) professionals as part of a care team for every Primary Care Health Home (PCHH). This program would target a staffing ratio of one CHW for every 250 participants. Currently, higher-level health professionals are performing CHW duties such as screenings and social determinants of health coordination. This funding would enable these professionals to focus on coordinating the patient's health care.														
FMAP Adjustment - SWO.GV.001														
Federal Funds	0	0.00	0	0.00	146,570	0.00	146,570	0.00	146,570	0.00	146,570	0.00	146,570	0.00
Program-Specific	0	0.00	0	0.00	146,570	0.00	146,570	0.00	146,570	0.00	146,570	0.00	146,570	0.00
Total	\$0	0.00	\$0	0.00	\$146,570	0.00	\$146,570	0.00	\$146,570	0.00	\$146,570	0.00	\$146,570	0.00
This funding is requested to compensate for the change in the Federal Medical Assistance Percentage (FMAP). Each year the Centers for Medicare and Medicaid Services (CMS) revises the percentage of Medicaid costs the federal government will reimburse to each state. FMAP varies by state and is based on criteria such as per capita income. Effective October 1, 2025, the blended FMAP rate will decrease from 65.500% to 64.658%. The enhanced FMAP rate for the CHIP children and the Women with Breast or Cervical Cancer program will decrease from 75.853% to 75.263%. This change will result in a net cost shift from Federal to GR funds for the Departments of Mental Health, Health and Senior Services, and Social Services. In order to realign the federal match, the Governor recommended an NDI for additional general revenue authority as well as corresponding core reductions in federal authority.														
The Federal Authority is Social Security Act 1905(b).														
Total - Health Homes	\$28,595,704	0.00	\$32,033,899	0.00	\$40,112,501	0.00	\$35,280,691	0.00	\$35,280,691	0.00	\$35,280,691	0.00	\$35,280,691	0.00

DEPARTMENT OF SOCIAL SERVICES

Section 11.815 – MO HealthNet Division – Health Home – Children with Medically Complex Conditions

Book 8, Page 1598

Description: This appropriation provides funding for a health home for children with medically complex conditions pursuant to the Medicaid Services Investment and Accountability Act of 2019 H.R.1839 otherwise known as Advancing Care for Exceptional (ACE) Kids Act. This section is in lieu of the Pediatric Pilot Program.

Legal Base: Medicaid Services Investment and Accountability Act of 2019 H.R.1839 (Advancing Care for Exceptional (ACE) Kids Act)

Funding Sources: General Revenue (1101) and Title XIX-Federal Fund (1163)

FY 2025 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

No core changes

GOVERNOR:

Core reduction: (\$9,647) FED PSD reduction due to change in the Federal Medical Assistance Percentage (FMAP) rate – see New Decision Item

HOUSE:

Same as Governor – no additional core changes

SENATE:

Same as Governor – no additional core changes

CONFERENCE:

Same as Governor – no additional core changes

Dept Of Social Services														
	FY25 Budget Amount*	FY25 Budget FTE*	FY26 Department Request	FY26 Department Request FTE	FY26 Governor Recommended as Amended	FY26 Governor Recommended as Amended FTE	FY26 House Recommended	FY26 House Recommended FTE	FY26 Senate Recommended	FY26 Senate Recommended FTE	FY26 Truly Agreed Finally Passed	FY26 Truly Agreed Finally Passed FTE	FY26 TAFP After VETO Action	FY26 TAFP After VETO Action FTE
Section 11.815														
Chldrn W Med Complex Cond - 830370B														
Core														
General Revenue	395,038	0.00	395,038	0.00	395,038	0.00	395,038	0.00	395,038	0.00	395,038	0.00	395,038	0.00
Program-Specific	395,038	0.00	395,038	0.00	395,038	0.00	395,038	0.00	395,038	0.00	395,038	0.00	395,038	0.00
Federal Funds	750,000	0.00	750,000	0.00	740,353	0.00	740,353	0.00	740,353	0.00	740,353	0.00	740,353	0.00
Program-Specific	750,000	0.00	750,000	0.00	740,353	0.00	740,353	0.00	740,353	0.00	740,353	0.00	740,353	0.00
Total	\$1,145,038	0.00	\$1,145,038	0.00	\$1,135,391	0.00	\$1,135,391	0.00	\$1,135,391	0.00	\$1,135,391	0.00	\$1,135,391	0.00
FMAP Adjustment - SWO.GV.001														
General Revenue	0	0.00	0	0.00	9,647	0.00	9,647	0.00	9,647	0.00	9,647	0.00	9,647	0.00
Program-Specific	0	0.00	0	0.00	9,647	0.00	9,647	0.00	9,647	0.00	9,647	0.00	9,647	0.00
Total	\$0	0.00	\$0	0.00	\$9,647	0.00	\$9,647	0.00	\$9,647	0.00	\$9,647	0.00	\$9,647	0.00
This funding is requested to compensate for the change in the Federal Medical Assistance Percentage (FMAP). Each year the Centers for Medicare and Medicaid Services (CMS) revises the percentage of Medicaid costs the federal government will reimburse to each state. FMAP varies by state and is based on criteria such as per capita income. Effective October 1, 2025, the blended FMAP rate will decrease from 65.500% to 64.658%. The enhanced FMAP rate for the CHIP children and the Women with Breast or Cervical Cancer program will decrease from 75.853% to 75.263%. This change will result in a net cost shift from Federal to GR funds for the Departments of Mental Health, Health and Senior Services, and Social Services. In order to realign the federal match, the Governor recommended an NDI for additional general revenue authority as well as corresponding core reductions in federal authority.														
The Federal Authority is Social Security Act 1905(b).														
Total - Chldrn W Med Complex Cond	\$1,145,038	0.00	\$1,145,038	0.00	\$1,145,038	0.00	\$1,145,038	0.00	\$1,145,038	0.00	\$1,145,038	0.00	\$1,145,038	0.00

*Does not include Supplementals.

DEPARTMENT OF SOCIAL SERVICES

Section 11.820 – MO HealthNet Division – Federal Reimbursement Allowance (FRA)

Book 8, Page 1603

Description: The Federal Reimbursement Allowance (FRA) program funds reimbursement of hospital services and the hospital portion of the managed care premiums provided to MO HealthNet participants and the uninsured. The FRA program serves as a General Revenue equivalent by supplementing payments for the cost of providing care to Medicaid participants under Title XIX of the Social Security Act, and to the uninsured.

Legal Base: State Statute: Section 208.453, RSMo.; Federal Law: Social Security Act Section 1903 (w); Federal Regulation: 42 CFR 433 Subpart B

Funding Sources: Title XIX-Federal Fund (1163), Title XXI-Children’s Health Insurance Program Federal Fund (1159), and Federal Reimbursement Allowance Fund (1142)

FY 2025 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

No core changes

GOVERNOR:

No core changes

HOUSE:

No core changes

SENATE:

No core changes

CONFERENCE:

No core changes

Dept Of Social Services														
	FY25 Budget Amount*	FY25 Budget FTE*	FY26 Department Request	FY26 Department Request FTE	FY26 Governor Recommended as Amended	FY26 Governor Recommended as Amended FTE	FY26 House Recommended	FY26 House Recommended FTE	FY26 Senate Recommended	FY26 Senate Recommended FTE	FY26 Truly Agreed Finally Passed	FY26 Truly Agreed Finally Passed FTE	FY26 TAFP After VETO Action	FY26 TAFP After VETO Action FTE
Section 11.820														
Fed Reimb Allowance - 830240B														
Core														
Federal Funds	1,110,251,184	0.00	1,110,251,184	0.00	1,110,251,184	0.00	1,110,251,184	0.00	1,110,251,184	0.00	1,110,251,184	0.00	1,110,251,184	0.00
Program-Specific	1,110,251,184	0.00	1,110,251,184	0.00	1,110,251,184	0.00	1,110,251,184	0.00	1,110,251,184	0.00	1,110,251,184	0.00	1,110,251,184	0.00
Other Funds	536,897,433	0.00	536,897,433	0.00	536,897,433	0.00	536,897,433	0.00	536,897,433	0.00	536,897,433	0.00	536,897,433	0.00
Program-Specific	536,897,433	0.00	536,897,433	0.00	536,897,433	0.00	536,897,433	0.00	536,897,433	0.00	536,897,433	0.00	536,897,433	0.00
Total	\$1,647,148,617	0.00	\$1,647,148,617	0.00	\$1,647,148,617	0.00	\$1,647,148,617	0.00	\$1,647,148,617	0.00	\$1,647,148,617	0.00	\$1,647,148,617	0.00
OPFS Trend - NOP.83B.018														
Federal Funds	0	0.00	5,250,554	0.00	5,198,137	0.00	3,118,882	0.00	3,118,882	0.00	3,118,882	0.00	3,118,882	0.00
Program-Specific	0	0.00	5,250,554	0.00	5,198,137	0.00	3,118,882	0.00	3,118,882	0.00	3,118,882	0.00	3,118,882	0.00
Other Funds	0	0.00	2,788,880	0.00	2,841,297	0.00	1,704,778	0.00	1,704,778	0.00	1,704,778	0.00	1,704,778	0.00
Program-Specific	0	0.00	2,788,880	0.00	2,841,297	0.00	1,704,778	0.00	1,704,778	0.00	1,704,778	0.00	1,704,778	0.00
Total	\$0	0.00	\$8,039,434	0.00	\$8,039,434	0.00	\$4,823,660	0.00	\$4,823,660	0.00	\$4,823,660	0.00	\$4,823,660	0.00
The MO HealthNet Division (MHD) outpatient regulation (13 CSR 70-15.160) explains that outpatient hospital services shall be reimbursed on a predetermined Fee-for-Service basis using an Outpatient Simplified Fee Schedule (OSFS) based on the Ambulatory Payment Classifications (APC) groups and fees under the Medicare Hospital Outpatient Prospective Payment System (OPPS). MHD is projecting an increase to the Medicare OPPS payment rates by five percent for SFY 2026.														
Total - Fed Reimb Allowance	\$1,647,148,617	0.00	\$1,655,188,051	0.00	\$1,655,188,051	0.00	\$1,651,972,277	0.00	\$1,651,972,277	0.00	\$1,651,972,277	0.00	\$1,651,972,277	0.00

*Does not include Supplementals.

DEPARTMENT OF SOCIAL SERVICES

Section 11.825 – MO HealthNet Division – Children’s Health Insurance Program (CHIP)

Book 8, Page 1608

Description: This item funds health care services provided to certain children age 18 and under who exceed the eligibility limits of traditional MO HealthNet coverage and would otherwise be uninsured. Effective May 1, 2017, Managed Care was geographically extended statewide. All children are mandatorily enrolled in MO HealthNet Managed Care but may opt out and receive their services through fee-for-service under certain circumstances. The Children's Health Insurance Program (CHIP) Title XXI funds are utilized for this expanded MO HealthNet population. Services provided under the CHIP program are reimbursed individually under the fee-for-service program or through a monthly capitation rate paid to the MO HealthNet Managed Care health plans that contract with the state. This integration was made possible through the passage of Senate Bill 632 (1998). Effective January 1, 2024, Missouri has implemented continuous eligibility for children, ensuring they remain eligible through Medicaid (MO HealthNet) or the Children’s Health Insurance Program (CHIP) for 12 months.

Legal Base: State Statute: Sections 208.631 through 208.658, RSMo.; Federal Law: Social Security Act, Title XXI; Federal Regulation: 42 CFR 457

Funding Sources: General Revenue (1101), Title XXI-Children’s Health Insurance Program Federal Fund (1159), and Federal Reimbursement Allowance Fund (1142)

FY 2025 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:
No core changes

GOVERNOR:
Core reduction: (\$3,916,919) GR PSD reduction due to change in the Federal Medical Assistance Percentage (FMAP) rate – see New Decision Item

HOUSE:
Same as Governor – no additional core changes

SENATE:
Same as Governor – no additional core changes

CONFERENCE:
Same as Governor – no additional core changes

Dept Of Social Services														
	FY25 Budget Amount*	FY25 Budget FTE*	FY26 Department Request	FY26 Department Request FTE	FY26 Governor Recommended as Amended	FY26 Governor Recommended as Amended FTE	FY26 House Recommended	FY26 House Recommended FTE	FY26 Senate Recommended	FY26 Senate Recommended FTE	FY26 Truly Agreed Finally Passed	FY26 Truly Agreed Finally Passed FTE	FY26 TAFP After VETO Action	FY26 TAFP After VETO Action FTE
Section 11.825														
Children'S Health Ins Program - 830242B														
Core														
General Revenue	93,728,958	0.00	93,728,958	0.00	89,812,039	0.00	89,812,039	0.00	89,812,039	0.00	89,812,039	0.00	89,812,039	0.00
Program-Specific	93,728,958	0.00	93,728,958	0.00	89,812,039	0.00	89,812,039	0.00	89,812,039	0.00	89,812,039	0.00	89,812,039	0.00
Federal Funds	292,816,588	0.00	292,816,588	0.00	292,816,588	0.00	292,816,588	0.00	292,816,588	0.00	292,816,588	0.00	292,816,588	0.00
Program-Specific	292,816,588	0.00	292,816,588	0.00	292,816,588	0.00	292,816,588	0.00	292,816,588	0.00	292,816,588	0.00	292,816,588	0.00
Other Funds	7,719,204	0.00	7,719,204	0.00	7,719,204	0.00	7,719,204	0.00	7,719,204	0.00	7,719,204	0.00	7,719,204	0.00
Program-Specific	7,719,204	0.00	7,719,204	0.00	7,719,204	0.00	7,719,204	0.00	7,719,204	0.00	7,719,204	0.00	7,719,204	0.00
Total	\$394,264,750	0.00	\$394,264,750	0.00	\$390,347,831	0.00	\$390,347,831	0.00	\$390,347,831	0.00	\$390,347,831	0.00	\$390,347,831	0.00
MC Actuarial Increase - NOP.83B.006														
General Revenue	0	0.00	2,628,650	0.00	2,678,127	0.00	0	0.00	2,678,127	0.00	0	0.00	0	0.00
Program-Specific	0	0.00	2,628,650	0.00	2,678,127	0.00	0	0.00	2,678,127	0.00	0	0.00	0	0.00
Federal Funds	0	0.00	8,197,752	0.00	8,148,275	0.00	0	0.00	8,148,275	0.00	0	0.00	0	0.00
Program-Specific	0	0.00	8,197,752	0.00	8,148,275	0.00	0	0.00	8,148,275	0.00	0	0.00	0	0.00
Total	\$0	0.00	\$10,826,402	0.00	\$10,826,402	0.00	\$0	0.00	\$10,826,402	0.00	\$0	0.00	\$0	0.00
This NDI is needed to fund an increase for managed care medical services, including the Managed Care, Adult Expansion Group (AEG), Managed Care Specialty Plan, CHIP, and Show Me Healthy Babies (SMHB) populations. The FY26 rates are based on an estimated budget trend developed utilizing actuarial standards which consider historical trends in utilization and inflation, budget and legislative changes, and federal requirements.														
MO HealthNet needs to maintain capitation rates at a sufficient level to ensure continued health plan and provider participation. The Federal Authority is Social Security Act Section 1915(b) and 1115 Waiver. The Federal Regulation is 42 CFR 438-Managed Care, and the State Authority is Section 208.166, RSMo. Final federal rules and regulations published June 14, 2002, effective August 13, 2003, require that capitation payments made on behalf of managed care participants be actuarially sound. Further, the state must provide the actuarial certification of the capitation rates to the CMS. The CMS Regional Office must review and approve all contracts for managed care as a condition for federal financial participation.														
Pharmacy Non-Spec PMPM - NOP.83B.020														
General Revenue	0	0.00	83,286	0.00	84,854	0.00	42,427	0.00	84,854	0.00	42,427	0.00	42,427	0.00
Expense & Equipment	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
Program-Specific	0	0.00	83,286	0.00	84,854	0.00	42,427	0.00	84,854	0.00	42,427	0.00	42,427	0.00
Federal Funds	0	0.00	259,737	0.00	258,169	0.00	129,084	0.00	258,169	0.00	129,084	0.00	129,084	0.00
Expense & Equipment	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
Program-Specific	0	0.00	259,737	0.00	258,169	0.00	129,084	0.00	258,169	0.00	129,084	0.00	129,084	0.00
Total	\$0	0.00	\$343,023	0.00	\$343,023	0.00	\$171,511	0.00	\$343,023	0.00	\$171,511	0.00	\$171,511	0.00
Funds are needed to address the anticipated increases in the pharmacy program due to new drugs, therapies, and inflation.														
This decision item requests funding for the ongoing inflation of pharmaceuticals and the anticipated increase in pharmacy expenditures attributed to non-specialty drugs.														
State statute: Section 208.201, RSMo; Federal Law: Social Security Act Section 1902(a)(4); Federal Regulations: 42 CFR, Part 432.														
Pharmacy Specialty PMPM - NOP.83B.022														
General Revenue	0	0.00	287,994	0.00	293,414	0.00	146,707	0.00	293,414	0.00	146,707	0.00	146,707	0.00
Expense & Equipment	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
Program-Specific	0	0.00	287,994	0.00	293,414	0.00	146,707	0.00	293,414	0.00	146,707	0.00	146,707	0.00
Federal Funds	0	0.00	898,142	0.00	892,722	0.00	446,361	0.00	892,722	0.00	446,361	0.00	446,361	0.00
Expense & Equipment	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00

*Does not include Supplementals.

Dept Of Social Services														
	FY25 Budget Amount*	FY25 Budget FTE*	FY26 Department Request	FY26 Department Request FTE	FY26 Governor Recommended as Amended	FY26 Governor Recommended as Amended FTE	FY26 House Recommended	FY26 House Recommended FTE	FY26 Senate Recommended	FY26 Senate Recommended FTE	FY26 Truly Agreed Finally Passed	FY26 Truly Agreed Finally Passed FTE	FY26 TAFP After VETO Action	FY26 TAFP After VETO Action FTE
Program-Specific	0	0.00	898,142	0.00	892,722	0.00	446,361	0.00	892,722	0.00	446,361	0.00	446,361	0.00
Total	\$0	0.00	\$1,186,136	0.00	\$1,186,136	0.00	\$593,068	0.00	\$1,186,136	0.00	\$593,068	0.00	\$593,068	0.00
Funds are needed to address the anticipated increases in the pharmacy program due to new drugs, therapies, and inflation. This decision item requests funding for the ongoing inflation of pharmaceuticals and the anticipated increase in pharmacy expenditures attributed to specialty drugs. Specialty drugs account for the majority of the projected increase in pharmacy expenditures. State statute: Section 208.201, RSMo. Federal Law: Social Security Act Section 1902(a)(4). Federal Regulations: 42 CFR, Part 432.														
MO HealthNet Cost to Continue - NOP.83B.032														
General Revenue	0	0.00	55,724,784	0.00	35,136,991	0.00	30,999,229	0.00	30,999,229	0.00	30,999,229	0.00	30,999,229	0.00
Program-Specific	0	0.00	55,724,784	0.00	35,136,991	0.00	30,999,229	0.00	30,999,229	0.00	30,999,229	0.00	30,999,229	0.00
Federal Funds	0	0.00	173,272,263	0.00	99,179,951	0.00	86,589,579	0.00	86,589,579	0.00	86,589,579	0.00	86,589,579	0.00
Program-Specific	0	0.00	173,272,263	0.00	99,179,951	0.00	86,589,579	0.00	86,589,579	0.00	86,589,579	0.00	86,589,579	0.00
Total	\$0	0.00	\$228,997,047	0.00	\$134,316,942	0.00	\$117,588,808	0.00	\$117,588,808	0.00	\$117,588,808	0.00	\$117,588,808	0.00
Funds are requested for estimated costs in the FY 2025 budget. These amounts are based on actual MO HealthNet program expenditures through November 2024 and historical trends. It is anticipated that additional funding will be necessary to operate current MO HealthNet programs for Fiscal Year 2026. Programs with estimated shortfalls are listed below.														
FMAP Adjustment - SWO.GV.001														
Federal Funds	0	0.00	0	0.00	3,916,919	0.00	3,916,919	0.00	3,916,919	0.00	3,916,919	0.00	3,916,919	0.00
Program-Specific	0	0.00	0	0.00	3,916,919	0.00	3,916,919	0.00	3,916,919	0.00	3,916,919	0.00	3,916,919	0.00
Total	\$0	0.00	\$0	0.00	\$3,916,919	0.00	\$3,916,919	0.00	\$3,916,919	0.00	\$3,916,919	0.00	\$3,916,919	0.00
This funding is requested to compensate for the change in the Federal Medical Assistance Percentage (FMAP). Each year the Centers for Medicare and Medicaid Services (CMS) revises the percentage of Medicaid costs the federal government will reimburse to each state. FMAP varies by state and is based on criteria such as per capita income. Effective October 1, 2025, the blended FMAP rate will decrease from 65.500% to 64.658%. The enhanced FMAP rate for the CHIP children and the Women with Breast or Cervical Cancer program will decrease from 75.853% to 75.263%. This change will result in a net cost shift from Federal to GR funds for the Departments of Mental Health, Health and Senior Services, and Social Services. In order to realign the federal match, the Governor recommended an NDI for additional general revenue authority as well as corresponding core reductions in federal authority.														
The Federal Authority is Social Security Act 1905(b).														
Total - Children'S Health Ins Program	\$394,264,750	0.00	\$635,617,358	0.00	\$540,937,253	0.00	\$512,618,137	0.00	\$524,209,119	0.00	\$512,618,137	0.00	\$512,618,137	0.00

*Does not include Supplementals.

DEPARTMENT OF SOCIAL SERVICES

Section 11.825 cont. – MO HealthNet Division – CHIP – Public Ground Emergency Medical Transportation Services

Book 8, Page 1615

Description: This funding is for payments to providers of public ground emergency medical transportation (GEMT) when providing services to persons paid for under the Children’s Health Insurance Program (CHIP).

Legal Base: State Statute: Sections 208.1030 and 208.1032, RSMo.

Funding Sources: Title XXI-Children’s Health Insurance Program Federal Fund (1159) and Ground Emergency Medical Transportation Fund (1422)

FY 2025 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

No core changes

GOVERNOR:

No core changes

HOUSE:

No core changes

SENATE:

No core changes

CONFERENCE:

No core changes

Dept Of Social Services														
	FY25 Budget Amount*	FY25 Budget FTE*	FY26 Department Request	FY26 Department Request FTE	FY26 Governor Recommended as Amended	FY26 Governor Recommended as Amended FTE	FY26 House Recommended	FY26 House Recommended FTE	FY26 Senate Recommended	FY26 Senate Recommended FTE	FY26 Truly Agreed Finally Passed	FY26 Truly Agreed Finally Passed FTE	FY26 TAFP After VETO Action	FY26 TAFP After VETO Action FTE
Section 11.825														
Chip Public Gemt - 830371B														
Core														
Federal Funds	1,896,325	0.00	1,896,325	0.00	1,896,325	0.00	1,896,325	0.00	1,896,325	0.00	1,896,325	0.00	1,896,325	0.00
Program-Specific	1,896,325	0.00	1,896,325	0.00	1,896,325	0.00	1,896,325	0.00	1,896,325	0.00	1,896,325	0.00	1,896,325	0.00
Other Funds	603,675	0.00	603,675	0.00	603,675	0.00	603,675	0.00	603,675	0.00	603,675	0.00	603,675	0.00
Program-Specific	603,675	0.00	603,675	0.00	603,675	0.00	603,675	0.00	603,675	0.00	603,675	0.00	603,675	0.00
Total	\$2,500,000	0.00	\$2,500,000	0.00	\$2,500,000	0.00	\$2,500,000	0.00	\$2,500,000	0.00	\$2,500,000	0.00	\$2,500,000	0.00
Total - Chip Public Gemt	\$2,500,000	0.00	\$2,500,000	0.00	\$2,500,000	0.00	\$2,500,000	0.00	\$2,500,000	0.00	\$2,500,000	0.00	\$2,500,000	0.00

*Does not include Supplementals.

DEPARTMENT OF SOCIAL SERVICES

Section 11.830 – MO HealthNet Division – Show-Me Healthy Babies (SMHB) Program

Book 8, Page 1620

Description: This item funds services for targeted low-income unborn children from families with household incomes up to 300% of the Federal Poverty Level (FPL). Services include all prenatal care and pregnancy-related services that benefit the health of the unborn child and that promote healthy labor, delivery, birth, and postpartum care. Senate Bill (SB) 106 and SB 45, effective July 7, 2023, extended the MO HealthNet coverage for these low-income women which will include full Medicaid benefits for the duration of the pregnancy and for one year following the end of the pregnancy. Coverage for the child continues for up to one year after birth (at that time the child may be eligible for Medicaid or CHIP) to help foster a child's healthy upbringing, unless otherwise prohibited by law or unless otherwise limited by the Missouri General Assembly through appropriations.

Legal Base: State Statute: Section 208.662, RSMo.; Federal Law: Social Security Act, Title XXI; Federal Regulation: 42 CFR 457.10

Funding Sources: General Revenue (1101) and Title XXI-Children’s Health Insurance Program Federal Fund (1159)

FY 2025 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

No core changes

GOVERNOR:

Core reduction: (\$192,448) FED PSD reduction due to change in the Federal Medical Assistance Percentage (FMAP) rate – see New Decision Item

HOUSE:

Core reduction: (\$1) FED PSD reduction due to change in the Federal Medical Assistance Percentage (FMAP) rate – adjustment to correct the Governor’s reduction to match the FMAP NDI amount

SENATE:

Same as House – no additional core changes

CONFERENCE:

Same as House – no additional core changes

Dept Of Social Services														
	FY25 Budget Amount*	FY25 Budget FTE*	FY26 Department Request	FY26 Department Request FTE	FY26 Governor Recommended as Amended	FY26 Governor Recommended as Amended FTE	FY26 House Recommended	FY26 House Recommended FTE	FY26 Senate Recommended	FY26 Senate Recommended FTE	FY26 Truly Agreed Finally Passed	FY26 Truly Agreed Finally Passed FTE	FY26 TAFP After VETO Action	FY26 TAFP After VETO Action FTE
Section 11.830														
Show-Me Babies - 830243B														
Core														
General Revenue	17,608,563	0.00	17,608,563	0.00	17,608,563	0.00	17,608,563	0.00	17,608,563	0.00	17,608,563	0.00	17,608,563	0.00
Program-Specific	17,608,563	0.00	17,608,563	0.00	17,608,563	0.00	17,608,563	0.00	17,608,563	0.00	17,608,563	0.00	17,608,563	0.00
Federal Funds	54,351,059	0.00	54,351,059	0.00	54,158,611	0.00	54,158,610	0.00	54,158,610	0.00	54,158,610	0.00	54,158,610	0.00
Program-Specific	54,351,059	0.00	54,351,059	0.00	54,158,611	0.00	54,158,610	0.00	54,158,610	0.00	54,158,610	0.00	54,158,610	0.00
Total	\$71,959,622	0.00	\$71,959,622	0.00	\$71,767,174	0.00	\$71,767,173	0.00	\$71,767,173	0.00	\$71,767,173	0.00	\$71,767,173	0.00
MC Actuarial Increase - NOP.83B.006														
General Revenue	0	0.00	1,157,841	0.00	1,179,634	0.00	0	0.00	1,179,634	0.00	0	0.00	0	0.00
Program-Specific	0	0.00	1,157,841	0.00	1,179,634	0.00	0	0.00	1,179,634	0.00	0	0.00	0	0.00
Federal Funds	0	0.00	3,610,862	0.00	3,589,069	0.00	0	0.00	3,589,069	0.00	0	0.00	0	0.00
Program-Specific	0	0.00	3,610,862	0.00	3,589,069	0.00	0	0.00	3,589,069	0.00	0	0.00	0	0.00
Total	\$0	0.00	\$4,768,703	0.00	\$4,768,703	0.00	\$0	0.00	\$4,768,703	0.00	\$0	0.00	\$0	0.00
This NDI is needed to fund an increase for managed care medical services, including the Managed Care, Adult Expansion Group (AEG), Managed Care Specialty Plan, CHIP, and Show Me Healthy Babies (SMHB) populations. The FY26 rates are based on an estimated budget trend developed utilizing actuarial standards which consider historical trends in utilization and inflation, budget and legislative changes, and federal requirements. MO HealthNet needs to maintain capitation rates at a sufficient level to ensure continued health plan and provider participation. The Federal Authority is Social Security Act Section 1915(b) and 1115 Waiver. The Federal Regulation is 42 CFR 438-Managed Care, and the State Authority is Section 208.166, RSMo. Final federal rules and regulations published June 14, 2002, effective August 13, 2003, require that capitation payments made on behalf of managed care participants be actuarially sound. Further, the state must provide the actuarial certification of the capitation rates to the CMS. The CMS Regional Office must review and approve all contracts for managed care as a condition for federal financial participation.														
Pharmacy Non-Spec PMPM - NOP.83B.020														
General Revenue	0	0.00	2,579	0.00	2,628	0.00	1,314	0.00	2,628	0.00	1,314	0.00	1,314	0.00
Expense & Equipment	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
Program-Specific	0	0.00	2,579	0.00	2,628	0.00	1,314	0.00	2,628	0.00	1,314	0.00	1,314	0.00
Federal Funds	0	0.00	8,043	0.00	7,994	0.00	3,997	0.00	7,994	0.00	3,997	0.00	3,997	0.00
Expense & Equipment	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
Program-Specific	0	0.00	8,043	0.00	7,994	0.00	3,997	0.00	7,994	0.00	3,997	0.00	3,997	0.00
Total	\$0	0.00	\$10,622	0.00	\$10,622	0.00	\$5,311	0.00	\$10,622	0.00	\$5,311	0.00	\$5,311	0.00
Funds are needed to address the anticipated increases in the pharmacy program due to new drugs, therapies, and inflation. This decision item requests funding for the ongoing inflation of pharmaceuticals and the anticipated increase in pharmacy expenditures attributed to non-specialty drugs. State statute: Section 208.201, RSMo; Federal Law: Social Security Act Section 1902(a)(4); Federal Regulations: 42 CFR, Part 432.														
Pharmacy Specialty PMPM - NOP.83B.022														
General Revenue	0	0.00	8,918	0.00	9,086	0.00	4,543	0.00	9,086	0.00	4,543	0.00	4,543	0.00
Expense & Equipment	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
Program-Specific	0	0.00	8,918	0.00	9,086	0.00	4,543	0.00	9,086	0.00	4,543	0.00	4,543	0.00
Federal Funds	0	0.00	27,811	0.00	27,643	0.00	13,821	0.00	27,643	0.00	13,821	0.00	13,821	0.00
Expense & Equipment	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
Program-Specific	0	0.00	27,811	0.00	27,643	0.00	13,821	0.00	27,643	0.00	13,821	0.00	13,821	0.00
Total	\$0	0.00	\$36,729	0.00	\$36,729	0.00	\$18,364	0.00	\$36,729	0.00	\$18,364	0.00	\$18,364	0.00

*Does not include Supplementals.

Dept Of Social Services														
	FY25 Budget Amount*	FY25 Budget FTE*	FY26 Department Request	FY26 Department Request FTE	FY26 Governor Recommended as Amended	FY26 Governor Recommended as Amended FTE	FY26 House Recommended	FY26 House Recommended FTE	FY26 Senate Recommended	FY26 Senate Recommended FTE	FY26 Truly Agreed Finally Passed	FY26 Truly Agreed Finally Passed FTE	FY26 TAFP After VETO Action	FY26 TAFP After VETO Action FTE
Funds are needed to address the anticipated increases in the pharmacy program due to new drugs, therapies, and inflation. This decision item requests funding for the ongoing inflation of pharmaceuticals and the anticipated increase in pharmacy expenditures attributed to specialty drugs. Specialty drugs account for the majority of the projected increase in pharmacy expenditures. State statute: Section 208.201, RSMo. Federal Law: Social Security Act Section 1902(a)(4). Federal Regulations: 42 CFR, Part 432.														
MO HealthNet Cost to Continue - NOP.83B.032														
General Revenue	0	0.00	8,788,326	0.00	9,341,117	0.00	9,162,788	0.00	9,162,788	0.00	9,162,788	0.00	9,162,788	0.00
Program-Specific	0	0.00	8,788,326	0.00	9,341,117	0.00	9,162,788	0.00	9,162,788	0.00	9,162,788	0.00	9,162,788	0.00
Federal Funds	0	0.00	27,970,706	0.00	27,633,353	0.00	27,090,125	0.00	27,090,125	0.00	27,090,125	0.00	27,090,125	0.00
Program-Specific	0	0.00	27,970,706	0.00	27,633,353	0.00	27,090,125	0.00	27,090,125	0.00	27,090,125	0.00	27,090,125	0.00
Total	\$0	0.00	\$36,759,032	0.00	\$36,974,470	0.00	\$36,252,913	0.00	\$36,252,913	0.00	\$36,252,913	0.00	\$36,252,913	0.00
Funds are requested for estimated costs in the FY 2025 budget. These amounts are based on actual MO HealthNet program expenditures through November 2024 and historical trends. It is anticipated that additional funding will be necessary to operate current MO HealthNet programs for Fiscal Year 2026. Programs with estimated shortfalls are listed below.														
FMAP Adjustment - SWO.GV.001														
General Revenue	0	0.00	0	0.00	192,449	0.00	192,449	0.00	192,449	0.00	192,449	0.00	192,449	0.00
Program-Specific	0	0.00	0	0.00	192,449	0.00	192,449	0.00	192,449	0.00	192,449	0.00	192,449	0.00
Total	\$0	0.00	\$0	0.00	\$192,449	0.00	\$192,449	0.00	\$192,449	0.00	\$192,449	0.00	\$192,449	0.00
This funding is requested to compensate for the change in the Federal Medical Assistance Percentage (FMAP). Each year the Centers for Medicare and Medicaid Services (CMS) revises the percentage of Medicaid costs the federal government will reimburse to each state. FMAP varies by state and is based on criteria such as per capita income. Effective October 1, 2025, the blended FMAP rate will decrease from 65.500% to 64.658%. The enhanced FMAP rate for the CHIP children and the Women with Breast or Cervical Cancer program will decrease from 75.853% to 75.263%. This change will result in a net cost shift from Federal to GR funds for the Departments of Mental Health, Health and Senior Services, and Social Services. In order to realign the federal match, the Governor recommended an NDI for additional general revenue authority as well as corresponding core reductions in federal authority.														
The Federal Authority is Social Security Act 1905(b).														
Total - Show-Me Babies	\$71,959,622	0.00	\$113,534,708	0.00	\$113,750,147	0.00	\$108,236,210	0.00	\$113,028,589	0.00	\$108,236,210	0.00	\$108,236,210	0.00

*Does not include Supplementals.

DEPARTMENT OF SOCIAL SERVICES

Section 11.835 – MO HealthNet Division – School District Medical Claiming

Book 8, Page 1627

Description: This item funds payments for School District Administrative Claiming (SDAC) and Individualized Education Plan (IEP) school-based health services (SBHS). This program allows school districts to obtain Medicaid funding for administrative activities that support direct services, designated medical services that are provided to children with disabilities in the school district (direct services), and specialized transportation for these direct services. Administrative activities are reimbursed through the SDAC program, which include activities associated with health and outreach programs for children in the school district. Direct services include physical, occupational, and speech evaluation and therapy services; audiology; personal care; private duty nursing; and behavioral health services that are medically necessary, and are included in an IEP for school age children. Specialized transportation services are provided to a child receiving IEP direct services who has a need for specific transportation as outlined in their IEP, and who would not otherwise get services while attending school if that need were not met. Some examples of specialized transportation services include specialized equipment or a specially adapted bus. As a result of allowing schools to receive reimbursement, 493 school districts are currently participating in SDAC, 325 school districts are enrolled to participate in the direct services cost settlement program, and 27 school districts are enrolled to participate in the IEP specialized transportation program.

Legal Base: Federal Regulation: 42 CFR 441.50 and 441.55-441.60

Funding Sources: General Revenue (1101) and Title XIX-Federal Fund (1163)

FY 2025 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

No core changes

GOVERNOR:

No core changes

HOUSE:

No core changes

SENATE:

No core changes

CONFERENCE:

No core changes

Dept Of Social Services														
	FY25 Budget Amount*	FY25 Budget FTE*	FY26 Department Request	FY26 Department Request FTE	FY26 Governor Recommended as Amended	FY26 Governor Recommended as Amended FTE	FY26 House Recommended	FY26 House Recommended FTE	FY26 Senate Recommended	FY26 Senate Recommended FTE	FY26 Truly Agreed Finally Passed	FY26 Truly Agreed Finally Passed FTE	FY26 TAFP After VETO Action	FY26 TAFP After VETO Action FTE
Section 11.835														
School District Claiming - 830244B														
Core														
General Revenue	242,525	0.00	242,525	0.00	242,525	0.00	242,525	0.00	242,525	0.00	242,525	0.00	242,525	0.00
Program-Specific	242,525	0.00	242,525	0.00	242,525	0.00	242,525	0.00	242,525	0.00	242,525	0.00	242,525	0.00
Federal Funds	139,864,081	0.00	139,864,081	0.00	139,864,081	0.00	139,864,081	0.00	139,864,081	0.00	139,864,081	0.00	139,864,081	0.00
Program-Specific	139,864,081	0.00	139,864,081	0.00	139,864,081	0.00	139,864,081	0.00	139,864,081	0.00	139,864,081	0.00	139,864,081	0.00
Total	\$140,106,606	0.00	\$140,106,606	0.00	\$140,106,606	0.00	\$140,106,606	0.00	\$140,106,606	0.00	\$140,106,606	0.00	\$140,106,606	0.00
Total - School District Claiming	\$140,106,606	0.00	\$140,106,606	0.00	\$140,106,606	0.00	\$140,106,606	0.00	\$140,106,606	0.00	\$140,106,606	0.00	\$140,106,606	0.00

*Does not include Supplementals.

DEPARTMENT OF SOCIAL SERVICES

Section 11.840 – MO HealthNet Division – Blind Pension Medical Benefits

Book 8, Page 1633

Description: This section provides funding for a state-only health care benefit for Blind Pension participants who do not qualify for Title XIX Medicaid. The objectives of the program are to ensure proper health care for the general health and well-being of MO HealthNet participants, to ensure adequate supply of providers, and to increase preventive services for all MO HealthNet participants. Services provided under the Blind Pension Medical Program are reimbursed individually under the fee-for-service program and comprise 0.2% of the total MO HealthNet Division expenditures.

Legal Base: State Statute: Sections 208.151 and 208.152, RSMo.

Funding Sources: General Revenue (1101)

FY 2025 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

No core changes

GOVERNOR:

No core changes

HOUSE:

No core changes

SENATE:

No core changes

CONFERENCE:

No core changes

Dept Of Social Services														
	FY25 Budget Amount*	FY25 Budget FTE*	FY26 Department Request	FY26 Department Request FTE	FY26 Governor Recommended as Amended	FY26 Governor Recommended as Amended FTE	FY26 House Recommended	FY26 House Recommended FTE	FY26 Senate Recommended	FY26 Senate Recommended FTE	FY26 Truly Agreed Finally Passed	FY26 Truly Agreed Finally Passed FTE	FY26 TAFP After VETO Action	FY26 TAFP After VETO Action FTE
Section 11.840														
Blind Pension Medical Benefits - 830245B														
Core														
General Revenue	23,462,082	0.00	23,462,082	0.00	23,462,082	0.00	23,462,082	0.00	23,462,082	0.00	23,462,082	0.00	23,462,082	0.00
Program-Specific	23,462,082	0.00	23,462,082	0.00	23,462,082	0.00	23,462,082	0.00	23,462,082	0.00	23,462,082	0.00	23,462,082	0.00
Total	\$23,462,082	0.00	\$23,462,082	0.00	\$23,462,082	0.00	\$23,462,082	0.00	\$23,462,082	0.00	\$23,462,082	0.00	\$23,462,082	0.00
Pharmacy Non-Spec PMPM - NOP.83B.020														
General Revenue	0	0.00	26,131	0.00	26,131	0.00	13,065	0.00	26,131	0.00	13,065	0.00	13,065	0.00
Expense & Equipment	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
Program-Specific	0	0.00	26,131	0.00	26,131	0.00	13,065	0.00	26,131	0.00	13,065	0.00	13,065	0.00
Total	\$0	0.00	\$26,131	0.00	\$26,131	0.00	\$13,065	0.00	\$26,131	0.00	\$13,065	0.00	\$13,065	0.00
Funds are needed to address the anticipated increases in the pharmacy program due to new drugs, therapies, and inflation. This decision item requests funding for the ongoing inflation of pharmaceuticals and the anticipated increase in pharmacy expenditures attributed to non-specialty drugs. State statute: Section 208.201, RSMo; Federal Law: Social Security Act Section 1902(a)(4); Federal Regulations: 42 CFR, Part 432.														
Pharmacy Specialty PMPM - NOP.83B.022														
General Revenue	0	0.00	90,359	0.00	90,359	0.00	45,180	0.00	90,359	0.00	45,180	0.00	45,180	0.00
Expense & Equipment	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
Program-Specific	0	0.00	90,359	0.00	90,359	0.00	45,180	0.00	90,359	0.00	45,180	0.00	45,180	0.00
Total	\$0	0.00	\$90,359	0.00	\$90,359	0.00	\$45,180	0.00	\$90,359	0.00	\$45,180	0.00	\$45,180	0.00
Funds are needed to address the anticipated increases in the pharmacy program due to new drugs, therapies, and inflation. This decision item requests funding for the ongoing inflation of pharmaceuticals and the anticipated increase in pharmacy expenditures attributed to specialty drugs. Specialty drugs account for the majority of the projected increase in pharmacy expenditures. State statute: Section 208.201, RSMo. Federal Law: Social Security Act Section 1902(a)(4). Federal Regulations: 42 CFR, Part 432.														
MO HealthNet Cost to Continue - NOP.83B.032														
General Revenue	0	0.00	2,091,906	0.00	1,529,715	0.00	1,319,842	0.00	1,319,842	0.00	1,319,842	0.00	1,319,842	0.00
Program-Specific	0	0.00	2,091,906	0.00	1,529,715	0.00	1,319,842	0.00	1,319,842	0.00	1,319,842	0.00	1,319,842	0.00
Total	\$0	0.00	\$2,091,906	0.00	\$1,529,715	0.00	\$1,319,842	0.00	\$1,319,842	0.00	\$1,319,842	0.00	\$1,319,842	0.00
Funds are requested for estimated costs in the FY 2025 budget. These amounts are based on actual MO HealthNet program expenditures through November 2024 and historical trends. It is anticipated that additional funding will be necessary to operate current MO HealthNet programs for Fiscal Year 2026. Programs with estimated shortfalls are listed below.														
Total - Blind Pension Medical Benefits	\$23,462,082	0.00	\$25,670,478	0.00	\$25,108,287	0.00	\$24,840,169	0.00	\$24,898,414	0.00	\$24,840,169	0.00	\$24,840,169	0.00

DEPARTMENT OF SOCIAL SERVICES

Section 11.845 – MO HealthNet Division – Adult Expansion Group (AEG)

Book 8, Page 1640

Description: This funds the MO HealthNet Managed Care program known as the Adult Expansion Group (AEG) that provides health care services to the MO HealthNet Managed Care adult population, age 19 to 64 with income up to 138% of the Federal Poverty Level (FPL). The program provides eligible adults a benefit package of essential, medically necessary health services including primary care, preventive care, and emergency services to improve comprehensive health coverage for adults.

Legal Base: Section 36c of Article IV of the Missouri Constitution

Funding Sources: Title XIX-Adult Expansion Federal Fund (1358), Pharmacy Reimbursement Allowance Fund (1144), Nursing Facility Reimbursement Allowance Fund (1196), Ambulance Service Reimbursement Allowance Fund (1958), FMAP Enhancement-Expansion Fund (2466), and Federal Reimbursement Allowance Fund (1142)

FY 2025 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

No core changes

GOVERNOR:

No core changes

HOUSE:

No core changes

SENATE:

No core changes

CONFERENCE:

No core changes

GOVERNOR VETO:

New Decision Item Veto: (\$320,025) FED PSD – Air Ambulance Rate Increase NDI

Dept Of Social Services														
	FY25 Budget Amount*	FY25 Budget FTE*	FY26 Department Request	FY26 Department Request FTE	FY26 Governor Recommended as Amended	FY26 Governor Recommended as Amended FTE	FY26 House Recommended	FY26 House Recommended FTE	FY26 Senate Recommended	FY26 Senate Recommended FTE	FY26 Truly Agreed Finally Passed	FY26 Truly Agreed Finally Passed FTE	FY26 TAFP After VETO Action	FY26 TAFP After VETO Action FTE
Section 11.845														
Adult Expansion Group (Aeg) - 830248B														
Core														
Federal Funds	2,866,811,276	0.00	2,866,811,276	0.00	2,866,811,276	0.00	2,866,811,276	0.00	2,866,811,276	0.00	2,866,811,276	0.00	2,866,811,276	0.00
Program-Specific	2,866,811,276	0.00	2,866,811,276	0.00	2,866,811,276	0.00	2,866,811,276	0.00	2,866,811,276	0.00	2,866,811,276	0.00	2,866,811,276	0.00
Other Funds	50,018,154	0.00	50,018,154	0.00	50,018,154	0.00	50,018,154	0.00	50,018,154	0.00	50,018,154	0.00	50,018,154	0.00
Program-Specific	50,018,154	0.00	50,018,154	0.00	50,018,154	0.00	50,018,154	0.00	50,018,154	0.00	50,018,154	0.00	50,018,154	0.00
Total	\$2,916,829,430	0.00	\$2,916,829,430	0.00	\$2,916,829,430	0.00	\$2,916,829,430	0.00	\$2,916,829,430	0.00	\$2,916,829,430	0.00	\$2,916,829,430	0.00
MC Actuarial Increase - NOP.83B.006														
Federal Funds	0	0.00	126,613,781	0.00	126,613,780	0.00	0	0.00	126,613,780	0.00	0	0.00	0	0.00
Program-Specific	0	0.00	126,613,781	0.00	126,613,780	0.00	0	0.00	126,613,780	0.00	0	0.00	0	0.00
Total	\$0	0.00	\$126,613,781	0.00	\$126,613,780	0.00	\$0	0.00	\$126,613,780	0.00	\$0	0.00	\$0	0.00
This NDI is needed to fund an increase for managed care medical services, including the Managed Care, Adult Expansion Group (AEG), Managed Care Specialty Plan, CHIP, and Show Me Healthy Babies (SMHB) populations. The FY26 rates are based on an estimated budget trend developed utilizing actuarial standards which consider historical trends in utilization and inflation, budget and legislative changes, and federal requirements. MO HealthNet needs to maintain capitation rates at a sufficient level to ensure continued health plan and provider participation. The Federal Authority is Social Security Act Section 1915(b) and 1115 Waiver. The Federal Regulation is 42 CFR 438-Managed Care, and the State Authority is Section 208.166, RSMo. Final federal rules and regulations published June 14, 2002, effective August 13, 2003, require that capitation payments made on behalf of managed care participants be actuarially sound. Further, the state must provide the actuarial certification of the capitation rates to the CMS. The CMS Regional Office must review and approve all contracts for managed care as a condition for federal financial participation.														
Pharmacy Non-Spec PMPM - NOP.83B.020														
Federal Funds	0	0.00	5,537,895	0.00	5,537,895	0.00	2,768,948	0.00	5,537,895	0.00	2,768,948	0.00	2,768,948	0.00
Expense & Equipment	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
Program-Specific	0	0.00	5,537,895	0.00	5,537,895	0.00	2,768,948	0.00	5,537,895	0.00	2,768,948	0.00	2,768,948	0.00
Total	\$0	0.00	\$5,537,895	0.00	\$5,537,895	0.00	\$2,768,948	0.00	\$5,537,895	0.00	\$2,768,948	0.00	\$2,768,948	0.00
Funds are needed to address the anticipated increases in the pharmacy program due to new drugs, therapies, and inflation. This decision item requests funding for the ongoing inflation of pharmaceuticals and the anticipated increase in pharmacy expenditures attributed to non-specialty drugs. State statute: Section 208.201, RSMo; Federal Law: Social Security Act Section 1902(a)(4); Federal Regulations: 42 CFR, Part 432.														
Pharmacy Specialty PMPM - NOP.83B.022														
Federal Funds	0	0.00	19,149,467	0.00	19,149,467	0.00	9,574,734	0.00	19,149,467	0.00	9,574,734	0.00	9,574,734	0.00
Expense & Equipment	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
Program-Specific	0	0.00	19,149,467	0.00	19,149,467	0.00	9,574,734	0.00	19,149,467	0.00	9,574,734	0.00	9,574,734	0.00
Total	\$0	0.00	\$19,149,467	0.00	\$19,149,467	0.00	\$9,574,734	0.00	\$19,149,467	0.00	\$9,574,734	0.00	\$9,574,734	0.00
Funds are needed to address the anticipated increases in the pharmacy program due to new drugs, therapies, and inflation. This decision item requests funding for the ongoing inflation of pharmaceuticals and the anticipated increase in pharmacy expenditures attributed to specialty drugs. Specialty drugs account for the majority of the projected increase in pharmacy expenditures. State statute: Section 208.201, RSMo. Federal Law: Social Security Act Section 1902(a)(4). Federal Regulations: 42 CFR, Part 432.														
MO HealthNet Cost to Continue - NOP.83B.032														
Federal Funds	0	0.00	603,988,276	0.00	1,256,062,890	0.00	1,235,734,019	0.00	1,235,734,019	0.00	1,235,734,019	0.00	1,235,734,019	0.00
Program-Specific	0	0.00	603,988,276	0.00	1,256,062,890	0.00	1,235,734,019	0.00	1,235,734,019	0.00	1,235,734,019	0.00	1,235,734,019	0.00
Other Funds	0	0.00	2,212,029	0.00	15,950,110	0.00	15,645,598	0.00	15,645,598	0.00	15,645,598	0.00	15,645,598	0.00
Program-Specific	0	0.00	2,212,029	0.00	15,950,110	0.00	15,645,598	0.00	15,645,598	0.00	15,645,598	0.00	15,645,598	0.00
Total	\$0	0.00	\$606,200,305	0.00	\$1,272,013,000	0.00	\$1,251,379,617	0.00	\$1,251,379,617	0.00	\$1,251,379,617	0.00	\$1,251,379,617	0.00

*Does not include Supplementals.

Dept Of Social Services														
	FY25 Budget Amount*	FY25 Budget FTE*	FY26 Department Request	FY26 Department Request FTE	FY26 Governor Recommended as Amended	FY26 Governor Recommended as Amended FTE	FY26 House Recommended	FY26 House Recommended FTE	FY26 Senate Recommended	FY26 Senate Recommended FTE	FY26 Truly Agreed Finally Passed	FY26 Truly Agreed Finally Passed FTE	FY26 TAFP After VETO Action	FY26 TAFP After VETO Action FTE
Funds are requested for estimated costs in the FY 2025 budget. These amounts are based on actual MO HealthNet program expenditures through November 2024 and historical trends. It is anticipated that additional funding will be necessary to operate current MO HealthNet programs for Fiscal Year 2026. Programs with estimated shortfalls are listed below.														
Air Ambulance Rate Inc - NOP.SN.196														
Federal Funds	0	0.00	0	0.00	0	0.00	0	0.00	320,025	0.00	320,025	0.00	0	0.00
Program-Specific	0	0.00	0	0.00	0	0.00	0	0.00	320,025	0.00	320,025	0.00	0	0.00
Total	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$320,025	0.00	\$320,025	0.00	\$0	0.00
Total - Adult Expansion Group (Aeg)	\$2,916,829,430	0.00	\$3,674,330,878	0.00	\$4,340,143,572	0.00	\$4,180,552,729	0.00	\$4,319,830,214	0.00	\$4,180,872,754	0.00	\$4,180,552,729	0.00

*Does not include Supplementals.

DEPARTMENT OF SOCIAL SERVICES

Section 11.845 cont. – MO HealthNet Division – Adult Expansion Group – MO MAPS

Book 8, Page 1646

Description: This funding is for the Missouri Medicaid Access to Physician Services (MO MAPS) Program to provide supplemental payments to the State’s essential Medicaid providers—the University of Missouri Health System (MU Health), University Health (Truman Medical Center), and University Health Physicians (Truman Medical Center). The MO MAPS Program is a payment arrangement intended to supplement, not supplant, the base managed care rates negotiated between health plans and providers. The MO MAPS Program will operate as a pool, in which a set dollar amount is established before the start of the fiscal year that MO HealthNet will distribute to the health plans. Health plans use the pool to increase reimbursement to providers based on utilization and the reimbursement is distributed according to predetermined criteria memorialized in agreements between them and the providers.

Legal Base: HB 3011 from the 101st General Assembly; Federal Regulation: 42 CFR 438.6(c)
Funding Sources: Title XIX-Adult Expansion Federal Fund (1358) and Department of Social Services Intergovernmental Transfer Fund (1139)
FY 2025 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:
No core changes

GOVERNOR:
No core changes

HOUSE:
No core changes

SENATE:
No core changes

CONFERENCE:
No core changes

Dept Of Social Services														
	FY25 Budget Amount*	FY25 Budget FTE*	FY26 Department Request	FY26 Department Request FTE	FY26 Governor Recommended as Amended	FY26 Governor Recommended as Amended FTE	FY26 House Recommended	FY26 House Recommended FTE	FY26 Senate Recommended	FY26 Senate Recommended FTE	FY26 Truly Agreed Finally Passed	FY26 Truly Agreed Finally Passed FTE	FY26 TAFP After VETO Action	FY26 TAFP After VETO Action FTE
Section 11.845														
AEG - MO Maps - 830372B														
Core														
Federal Funds	14,727,678	0.00	14,727,678	0.00	14,727,678	0.00	14,727,678	0.00	14,727,678	0.00	14,727,678	0.00	14,727,678	0.00
Program-Specific	14,727,678	0.00	14,727,678	0.00	14,727,678	0.00	14,727,678	0.00	14,727,678	0.00	14,727,678	0.00	14,727,678	0.00
Other Funds	1,636,409	0.00	1,636,409	0.00	1,636,409	0.00	1,636,409	0.00	1,636,409	0.00	1,636,409	0.00	1,636,409	0.00
Program-Specific	1,636,409	0.00	1,636,409	0.00	1,636,409	0.00	1,636,409	0.00	1,636,409	0.00	1,636,409	0.00	1,636,409	0.00
Total	\$16,364,087	0.00	\$16,364,087	0.00	\$16,364,087	0.00	\$16,364,087	0.00	\$16,364,087	0.00	\$16,364,087	0.00	\$16,364,087	0.00
AEG MO MAPS CTC - NOP.83B.014														
Federal Funds	0	0.00	28,970,058	0.00	28,970,058	0.00	28,970,058	0.00	28,970,058	0.00	28,970,058	0.00	28,970,058	0.00
Program-Specific	0	0.00	28,970,058	0.00	28,970,058	0.00	28,970,058	0.00	28,970,058	0.00	28,970,058	0.00	28,970,058	0.00
Other Funds	0	0.00	3,218,895	0.00	3,218,895	0.00	3,218,895	0.00	3,218,895	0.00	3,218,895	0.00	3,218,895	0.00
Program-Specific	0	0.00	3,218,895	0.00	3,218,895	0.00	3,218,895	0.00	3,218,895	0.00	3,218,895	0.00	3,218,895	0.00
Total	\$0	0.00	\$32,188,953	0.00	\$32,188,953	0.00	\$32,188,953	0.00	\$32,188,953	0.00	\$32,188,953	0.00	\$32,188,953	0.00
In SFY 2024, the MO HealthNet Division (MHD) initiated the Missouri Medicaid Access to Physician Services (MO MAPS) payments within the Adult Expansion Group (AEG). These payments are made using the newly created AEG appropriations. For SFY 2026, these payments are projected to increase.														
Funds are needed for the MO MAPS Program to provide supplemental payments to the State's essential Medicaid providers—the University of Missouri Health System (MU Health), University Health, and University Health Physicians. The goal is to increase access to primary and specialty care services for MO HealthNet Managed Care members while minimizing the administrative burden on the health plans, providers, and MO HealthNet. This CMS-approved payment methodology is consistent with 42 CFR 438.6(c) and was designed with technical assistance from CMS. Authorization is provided in House Bill 3011 from the 101st General Assembly.														
The MO MAPS Program is a payment arrangement intended to supplement, not supplant, the base managed care rates negotiated between health plans and providers. The MO MAPS Program will operate as a pool, in which a set dollar amount is established before the start of the fiscal year that MO HealthNet will distribute to the health plans. Health plans use the pool to increase reimbursement to providers based on utilization and the reimbursement is distributed according to predetermined criteria memorialized in agreements between them and the providers.														
Total - AEG - MO Maps	\$16,364,087	0.00	\$48,553,040	0.00	\$48,553,040	0.00	\$48,553,040	0.00	\$48,553,040	0.00	\$48,553,040	0.00	\$48,553,040	0.00

*Does not include Supplementals.

DEPARTMENT OF SOCIAL SERVICES

Section 11.845 cont. – MO HealthNet Division – Adult Expansion Group – DMH IGT

Book 8, Page 1655

Description: This program provides payments for Community Psychiatric Rehabilitation (CPR), Comprehensive Substance Treatment and Rehabilitation (CSTAR), behavioral health Targeted Case Management (TCM) and Certified Community Behavioral Health Organizations (CCBHO) or MO HealthNet participants and the uninsured. The Department of Mental Health (DMH) utilizes an intergovernmental transfer (IGT) reimbursement methodology, where DMH serves as a provider of Medicaid services to the Department of Social Services for CSTAR, CPR, TCM and CCBHO services. The state match is provided using an IGT. *(Non-count)*

Legal Base: Federal Regulation: 42 CFR 433.51

Funding Sources: Title XIX-Adult Expansion Federal Fund (1358) and Department of Social Services Intergovernmental Transfer Fund (1139)

FY 2025 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

No core changes

GOVERNOR:

No core changes

HOUSE:

No core changes

SENATE:

No core changes

CONFERENCE:

No core changes

Dept Of Social Services														
	FY25 Budget Amount*	FY25 Budget FTE*	FY26 Department Request	FY26 Department Request FTE	FY26 Governor Recommended as Amended	FY26 Governor Recommended as Amended FTE	FY26 House Recommended	FY26 House Recommended FTE	FY26 Senate Recommended	FY26 Senate Recommended FTE	FY26 Truly Agreed Finally Passed	FY26 Truly Agreed Finally Passed FTE	FY26 TAFP After VETO Action	FY26 TAFP After VETO Action FTE
Section 11.845														
AEG - Dmh Igt - 830373B														
Core														
Federal Funds	117,348,750	0.00	117,348,750	0.00	117,348,750	0.00	117,348,750	0.00	117,348,750	0.00	117,348,750	0.00	117,348,750	0.00
Program-Specific	117,348,750	0.00	117,348,750	0.00	117,348,750	0.00	117,348,750	0.00	117,348,750	0.00	117,348,750	0.00	117,348,750	0.00
Other Funds	13,038,750	0.00	13,038,750	0.00	13,038,750	0.00	13,038,750	0.00	13,038,750	0.00	13,038,750	0.00	13,038,750	0.00
Program-Specific	13,038,750	0.00	13,038,750	0.00	13,038,750	0.00	13,038,750	0.00	13,038,750	0.00	13,038,750	0.00	13,038,750	0.00
Total	\$130,387,500	0.00	\$130,387,500	0.00	\$130,387,500	0.00	\$130,387,500	0.00	\$130,387,500	0.00	\$130,387,500	0.00	\$130,387,500	0.00
IGT DMH CTC - NOP.83B.034														
Federal Funds	0	0.00	83,866,405	0.00	168,860,952	0.00	168,860,952	0.00	168,860,952	0.00	168,860,952	0.00	168,860,952	0.00
Program-Specific	0	0.00	83,866,405	0.00	168,860,952	0.00	168,860,952	0.00	168,860,952	0.00	168,860,952	0.00	168,860,952	0.00
Other Funds	0	0.00	9,318,489	0.00	18,762,328	0.00	18,762,328	0.00	18,762,328	0.00	18,762,328	0.00	18,762,328	0.00
Program-Specific	0	0.00	9,318,489	0.00	18,762,328	0.00	18,762,328	0.00	18,762,328	0.00	18,762,328	0.00	18,762,328	0.00
Total	\$0	0.00	\$93,184,894	0.00	\$187,623,280	0.00	\$187,623,280	0.00	\$187,623,280	0.00	\$187,623,280	0.00	\$187,623,280	0.00
This program provides payments for Community Psychiatric Rehabilitation (CPR), Comprehensive Substance Treatment and Rehabilitation (CSTAR), behavioral health Targeted Case Management (TCM) and Certified Community Behavioral Health Organizations (CCBHO). The Department of Mental Health (DMH) utilizes an intergovernmental transfer (IGT) reimbursement methodology, where DMH serves as a provider of Medicaid services to the Department of Social Services for CSTAR, CPR, TCM and CCBHC services. The state match is provided using an IGT. Federal Medicaid regulation (42 CFR 433.51) allows state and local governmental units (including public providers) to transfer to the Medicaid agency the non-federal share of Medicaid payments. The amounts transferred are used as the state match to earn federal Medicaid funds. These transfers are called intergovernmental transfers (IGTs). This funding maximizes eligible costs for federal Medicaid funds, utilizing current state and local funding sources as match for services. Funds are requested for estimated costs in the FY 2026 budget. These amounts are based on actual MO HealthNet program expenditures through August 2024 and historical trends. It is anticipated that additional funding will be necessary for the DMH programs for Fiscal Year 2026. This additional funding will be needed in the AEG section (HB Section 11.830) and the IGT DMH section (HB Section 11.840).														
Total - AEG - Dmh Igt	\$130,387,500	0.00	\$223,572,394	0.00	\$318,010,780	0.00	\$318,010,780	0.00	\$318,010,780	0.00	\$318,010,780	0.00	\$318,010,780	0.00

*Does not include Supplementals.

DEPARTMENT OF SOCIAL SERVICES

Section 11.845 cont. – MO HealthNet Division – AEG – Public Ground Emergency Medical Transportation Services

Book 8, Page 1660

Description: This funding is for payments to providers of public ground emergency medical transportation (GEMT) when providing services to persons paid for under the Adult Expansion Group (AEG).

Legal Base: State Statute: Sections 208.1030 and 208.1032, RSMo.

Funding Sources: Title XIX-Adult Expansion Federal Fund (1358) and Ground Emergency Medical Transportation Fund (1422)

FY 2025 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

No core changes

GOVERNOR:

No core changes

HOUSE:

No core changes

SENATE:

No core changes

CONFERENCE:

No core changes

Dept Of Social Services														
	FY25 Budget Amount*	FY25 Budget FTE*	FY26 Department Request	FY26 Department Request FTE	FY26 Governor Recommended as Amended	FY26 Governor Recommended as Amended FTE	FY26 House Recommended	FY26 House Recommended FTE	FY26 Senate Recommended	FY26 Senate Recommended FTE	FY26 Truly Agreed Finally Passed	FY26 Truly Agreed Finally Passed FTE	FY26 TAFP After VETO Action	FY26 TAFP After VETO Action FTE
Section 11.845														
AEG Public Gemt - 830374B														
Core														
Federal Funds	15,918,750	0.00	15,918,750	0.00	15,918,750	0.00	15,918,750	0.00	15,918,750	0.00	15,918,750	0.00	15,918,750	0.00
Program-Specific	15,918,750	0.00	15,918,750	0.00	15,918,750	0.00	15,918,750	0.00	15,918,750	0.00	15,918,750	0.00	15,918,750	0.00
Other Funds	1,768,750	0.00	1,768,750	0.00	1,768,750	0.00	1,768,750	0.00	1,768,750	0.00	1,768,750	0.00	1,768,750	0.00
Program-Specific	1,768,750	0.00	1,768,750	0.00	1,768,750	0.00	1,768,750	0.00	1,768,750	0.00	1,768,750	0.00	1,768,750	0.00
Total	\$17,687,500	0.00	\$17,687,500	0.00	\$17,687,500	0.00	\$17,687,500	0.00	\$17,687,500	0.00	\$17,687,500	0.00	\$17,687,500	0.00
Total - AEG Public Gemt	\$17,687,500	0.00	\$17,687,500	0.00	\$17,687,500	0.00	\$17,687,500	0.00	\$17,687,500	0.00	\$17,687,500	0.00	\$17,687,500	0.00

*Does not include Supplementals.

DEPARTMENT OF SOCIAL SERVICES

Section 11.850 – MO HealthNet Division – Intergovernmental Transfer (IGT) Expenditure Transfer

Book 8, Page 1665

Description: This item funds a transfer from the State Treasury to the General Revenue Fund for the purpose of providing the state match for Medicaid payments. This authority provides non-counted transfers between funds. Federal regulation requires states to establish that they have sufficient state dollars available in order to draw down the federal matching dollars. These transfers are used for that purpose. *(Non-count)*

Legal Base: State Statute: Sections 208.151 and 208.152, RSMo.

Funding Sources: Department of Social Services Intergovernmental Transfer Fund (1139)

FY 2025 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:
No core changes

GOVERNOR:
No core changes

HOUSE:
No core changes

SENATE:
No core changes

CONFERENCE:
No core changes

Dept Of Social Services														
	FY25 Budget Amount*	FY25 Budget FTE*	FY26 Department Request	FY26 Department Request FTE	FY26 Governor Recommended as Amended	FY26 Governor Recommended as Amended FTE	FY26 House Recommended	FY26 House Recommended FTE	FY26 Senate Recommended	FY26 Senate Recommended FTE	FY26 Truly Agreed Finally Passed	FY26 Truly Agreed Finally Passed FTE	FY26 TAFP After VETO Action	FY26 TAFP After VETO Action FTE
Section 11.850														
Igt Expend Transfer - 830249B														
Core														
Other Funds	137,074,165	0.00	137,074,165	0.00	137,074,165	0.00	137,074,165	0.00	137,074,165	0.00	137,074,165	0.00	137,074,165	0.00
Transfers	137,074,165	0.00	137,074,165	0.00	137,074,165	0.00	137,074,165	0.00	137,074,165	0.00	137,074,165	0.00	137,074,165	0.00
Total	\$137,074,165	0.00	\$137,074,165	0.00	\$137,074,165	0.00	\$137,074,165	0.00	\$137,074,165	0.00	\$137,074,165	0.00	\$137,074,165	0.00
Total - Igt Expend Transfer	\$137,074,165	0.00	\$137,074,165	0.00	\$137,074,165	0.00	\$137,074,165	0.00	\$137,074,165	0.00	\$137,074,165	0.00	\$137,074,165	0.00

*Does not include Supplementals.

DEPARTMENT OF SOCIAL SERVICES

Section 11.855 – MO HealthNet Division – Intergovernmental Transfer (IGT) DMH Medicaid Program

Book 8, Page 1670

Description: The item funds payments for MO HealthNet participants and the uninsured through intergovernmental transfers for Community Psychiatric Rehabilitation (CPR) services, Comprehensive Substance Abuse Treatment and Rehabilitation (CSTAR) services, Targeted Case Management (TCM) for behavioral health services, and Certified Community Behavioral Health Organizations (CCBHO). The Department of Mental Health (DMH) utilizes an intergovernmental transfer (IGT) reimbursement methodology, where DMH serves as a provider of Medicaid services to the Department of Social Services for CSTAR, CPR, TCM and CCBHC services. The state match is provided using an IGT. *(Non-count)*

Legal Base: State Statute: Sections 208.152 and 208.153, RSMo. Federal Law: Social Security Act Sections 1905 (a) (1) and (2) (d) (5) (h); Federal Regulation: 42 CFR 433.51 and 440.20

Funding Sources: Title XIX-Federal Fund (1163) and Department of Social Services Intergovernmental Transfer Fund (1139)

FY 2025 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

No core changes

GOVERNOR:

No core changes

HOUSE:

No core changes

SENATE:

No core changes

CONFERENCE:

No core changes

Dept Of Social Services														
	FY25 Budget Amount*	FY25 Budget FTE*	FY26 Department Request	FY26 Department Request FTE	FY26 Governor Recommended as Amended	FY26 Governor Recommended as Amended FTE	FY26 House Recommended	FY26 House Recommended FTE	FY26 Senate Recommended	FY26 Senate Recommended FTE	FY26 Truly Agreed Finally Passed	FY26 Truly Agreed Finally Passed FTE	FY26 TAFP After VETO Action	FY26 TAFP After VETO Action FTE
Section 11.855														
Igt Dmh Medicaid Program - 830250B														
Core														
Federal Funds	526,932,796	0.00	526,932,796	0.00	526,932,796	0.00	526,932,796	0.00	526,932,796	0.00	526,932,796	0.00	526,932,796	0.00
Program-Specific	526,932,796	0.00	526,932,796	0.00	526,932,796	0.00	526,932,796	0.00	526,932,796	0.00	526,932,796	0.00	526,932,796	0.00
Other Funds	221,885,958	0.00	221,885,958	0.00	221,885,958	0.00	221,885,958	0.00	221,885,958	0.00	221,885,958	0.00	221,885,958	0.00
Program-Specific	221,885,958	0.00	221,885,958	0.00	221,885,958	0.00	221,885,958	0.00	221,885,958	0.00	221,885,958	0.00	221,885,958	0.00
Total	\$748,818,754	0.00	\$748,818,754	0.00	\$748,818,754	0.00	\$748,818,754	0.00	\$748,818,754	0.00	\$748,818,754	0.00	\$748,818,754	0.00
IGT DMH CTC - NOP.83B.034														
Federal Funds	0	0.00	110,991,293	0.00	86,153,902	0.00	86,153,902	0.00	86,153,902	0.00	86,153,902	0.00	86,153,902	0.00
Program-Specific	0	0.00	110,991,293	0.00	86,153,902	0.00	86,153,902	0.00	86,153,902	0.00	86,153,902	0.00	86,153,902	0.00
Other Funds	0	0.00	97,753,191	0.00	90,845,754	0.00	90,845,754	0.00	90,845,754	0.00	90,845,754	0.00	90,845,754	0.00
Program-Specific	0	0.00	97,753,191	0.00	90,845,754	0.00	90,845,754	0.00	90,845,754	0.00	90,845,754	0.00	90,845,754	0.00
Total	\$0	0.00	\$208,744,484	0.00	\$176,999,656	0.00	\$176,999,656	0.00	\$176,999,656	0.00	\$176,999,656	0.00	\$176,999,656	0.00
This program provides payments for Community Psychiatric Rehabilitation (CPR), Comprehensive Substance Treatment and Rehabilitation (CSTAR), behavioral health Targeted Case Management (TCM) and Certified Community Behavioral Health Organizations (CCBHO). The Department of Mental Health (DMH) utilizes an intergovernmental transfer (IGT) reimbursement methodology, where DMH serves as a provider of Medicaid services to the Department of Social Services for CSTAR, CPR, TCM and CCBHC services. The state match is provided using an IGT. Federal Medicaid regulation (42 CFR 433.51) allows state and local governmental units (including public providers) to transfer to the Medicaid agency the non-federal share of Medicaid payments. The amounts transferred are used as the state match to earn federal Medicaid funds. These transfers are called intergovernmental transfers (IGTs). This funding maximizes eligible costs for federal Medicaid funds, utilizing current state and local funding sources as match for services. Funds are requested for estimated costs in the FY 2026 budget. These amounts are based on actual MO HealthNet program expenditures through August 2024 and historical trends. It is anticipated that additional funding will be necessary for the DMH programs for Fiscal Year 2026. This additional funding will be needed in the AEG section (HB Section 11.830) and the IGT DMH section (HB Section 11.840).														
Total - Igt Dmh Medicaid Program	\$748,818,754	0.00	\$957,563,238	0.00	\$925,818,410	0.00	\$925,818,410	0.00	\$925,818,410	0.00	\$925,818,410	0.00	\$925,818,410	0.00

*Does not include Supplementals.

DEPARTMENT OF SOCIAL SERVICES

Section 11.860 & 11.865 – MO HealthNet Division – Pharmacy Provider Tax Transfers

Book 8, Page 1675

Description: These sections provide the mechanism to transfer funding between General Revenue and the Pharmacy Federal Reimbursement Allowance Fund for the pharmacy reimbursement program. *(Non-count)*

Legal Base: HB 11

Funding Sources: General Revenue (1101) and Pharmacy Federal Reimbursement Allowance (1144)

FY 2025 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

No core changes

GOVERNOR:

No core changes

HOUSE:

No core changes

SENATE:

No core changes

CONFERENCE:

No core changes

Dept Of Social Services														
	FY25 Budget Amount*	FY25 Budget FTE*	FY26 Department Request	FY26 Department Request FTE	FY26 Governor Recommended as Amended	FY26 Governor Recommended as Amended FTE	FY26 House Recommended	FY26 House Recommended FTE	FY26 Senate Recommended	FY26 Senate Recommended FTE	FY26 Truly Agreed Finally Passed	FY26 Truly Agreed Finally Passed FTE	FY26 TAFP After VETO Action	FY26 TAFP After VETO Action FTE
Section 11.860														
Gr Pharmacy Fra Transfer - 830252B														
Core														
General Revenue	38,737,111	0.00	38,737,111	0.00	38,737,111	0.00	38,737,111	0.00	38,737,111	0.00	38,737,111	0.00	38,737,111	0.00
Transfers	38,737,111	0.00	38,737,111	0.00	38,737,111	0.00	38,737,111	0.00	38,737,111	0.00	38,737,111	0.00	38,737,111	0.00
Total	\$38,737,111	0.00	\$38,737,111	0.00	\$38,737,111	0.00	\$38,737,111	0.00	\$38,737,111	0.00	\$38,737,111	0.00	\$38,737,111	0.00
Total - Gr Pharmacy Fra Transfer	\$38,737,111	0.00	\$38,737,111	0.00	\$38,737,111	0.00	\$38,737,111	0.00	\$38,737,111	0.00	\$38,737,111	0.00	\$38,737,111	0.00

*Does not include Supplementals.

Dept Of Social Services														
	FY25 Budget Amount*	FY25 Budget FTE*	FY26 Department Request	FY26 Department Request FTE	FY26 Governor Recommended as Amended	FY26 Governor Recommended as Amended FTE	FY26 House Recommended	FY26 House Recommended FTE	FY26 Senate Recommended	FY26 Senate Recommended FTE	FY26 Truly Agreed Finally Passed	FY26 Truly Agreed Finally Passed FTE	FY26 TAFP After VETO Action	FY26 TAFP After VETO Action FTE
Section 11.865														
Pharmacy Fra Transfer - 830253B														
Core														
Other Funds	38,737,111	0.00	38,737,111	0.00	38,737,111	0.00	38,737,111	0.00	38,737,111	0.00	38,737,111	0.00	38,737,111	0.00
Transfers	38,737,111	0.00	38,737,111	0.00	38,737,111	0.00	38,737,111	0.00	38,737,111	0.00	38,737,111	0.00	38,737,111	0.00
Total	\$38,737,111	0.00	\$38,737,111	0.00	\$38,737,111	0.00	\$38,737,111	0.00	\$38,737,111	0.00	\$38,737,111	0.00	\$38,737,111	0.00
Total - Pharmacy Fra Transfer	\$38,737,111	0.00	\$38,737,111	0.00	\$38,737,111	0.00	\$38,737,111	0.00	\$38,737,111	0.00	\$38,737,111	0.00	\$38,737,111	0.00

*Does not include Supplementals.

DEPARTMENT OF SOCIAL SERVICES

Section 11.870 & 11.875 – MO HealthNet Division – Ambulance Service Reimbursement Allowance Transfer

Book 8, Page 1685

Description: These transfer sections allow funding to be transferred between General Revenue and the Ambulance Service Reimbursement Allowance Fund. *(Non-count)*

Legal Base: HB 11

Funding Sources: General Revenue (1101) and Ambulance Service Reimbursement Allowance Fund (1958)

FY 2025 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

No core changes

GOVERNOR:

No core changes

HOUSE:

No core changes

SENATE:

No core changes

CONFERENCE:

No core changes

Dept Of Social Services														
	FY25 Budget Amount*	FY25 Budget FTE*	FY26 Department Request	FY26 Department Request FTE	FY26 Governor Recommended as Amended	FY26 Governor Recommended as Amended FTE	FY26 House Recommended	FY26 House Recommended FTE	FY26 Senate Recommended	FY26 Senate Recommended FTE	FY26 Truly Agreed Finally Passed	FY26 Truly Agreed Finally Passed FTE	FY26 TAFP After VETO Action	FY26 TAFP After VETO Action FTE
Section 11.870														
Ambulance Srv Reim Allow Trf - 830254B														
Core														
General Revenue	20,837,332	0.00	20,837,332	0.00	20,837,332	0.00	20,837,332	0.00	20,837,332	0.00	20,837,332	0.00	20,837,332	0.00
Transfers	20,837,332	0.00	20,837,332	0.00	20,837,332	0.00	20,837,332	0.00	20,837,332	0.00	20,837,332	0.00	20,837,332	0.00
Total	\$20,837,332	0.00	\$20,837,332	0.00	\$20,837,332	0.00	\$20,837,332	0.00	\$20,837,332	0.00	\$20,837,332	0.00	\$20,837,332	0.00
Total - Ambulance Srv Reim Allow Trf	\$20,837,332	0.00	\$20,837,332	0.00	\$20,837,332	0.00	\$20,837,332	0.00	\$20,837,332	0.00	\$20,837,332	0.00	\$20,837,332	0.00

*Does not include Supplementals.

Dept Of Social Services														
	FY25 Budget Amount*	FY25 Budget FTE*	FY26 Department Request	FY26 Department Request FTE	FY26 Governor Recommended as Amended	FY26 Governor Recommended as Amended FTE	FY26 House Recommended	FY26 House Recommended FTE	FY26 Senate Recommended	FY26 Senate Recommended FTE	FY26 Truly Agreed Finally Passed	FY26 Truly Agreed Finally Passed FTE	FY26 TAFP After VETO Action	FY26 TAFP After VETO Action FTE
Section 11.875														
Gr Ambulance Srv Reim All Trf - 830256B														
Core														
Other Funds	20,837,332	0.00	20,837,332	0.00	20,837,332	0.00	20,837,332	0.00	20,837,332	0.00	20,837,332	0.00	20,837,332	0.00
Transfers	20,837,332	0.00	20,837,332	0.00	20,837,332	0.00	20,837,332	0.00	20,837,332	0.00	20,837,332	0.00	20,837,332	0.00
Total	\$20,837,332	0.00	\$20,837,332	0.00	\$20,837,332	0.00	\$20,837,332	0.00	\$20,837,332	0.00	\$20,837,332	0.00	\$20,837,332	0.00
Total - Gr Ambulance Srv Reim All Trf	\$20,837,332	0.00	\$20,837,332	0.00	\$20,837,332	0.00	\$20,837,332	0.00	\$20,837,332	0.00	\$20,837,332	0.00	\$20,837,332	0.00

*Does not include Supplementals.

DEPARTMENT OF SOCIAL SERVICES

Section 11.880 & 11.885 – MO HealthNet Division – Federal Reimbursement Allowance Transfer

Book 8, Page 1695

Description: These transfer sections allow funding to be transferred between General Revenue and the Federal Reimbursement Allowance Fund. *(Non-count)*

Legal Base: HB 11

Funding Sources: General Revenue (1101) and Federal Reimbursement Allowance Fund (1142)

FY 2025 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

No core changes

GOVERNOR:

No core changes

HOUSE:

No core changes

SENATE:

No core changes

CONFERENCE:

No core changes

Dept Of Social Services														
	FY25 Budget Amount*	FY25 Budget FTE*	FY26 Department Request	FY26 Department Request FTE	FY26 Governor Recommended as Amended	FY26 Governor Recommended as Amended FTE	FY26 House Recommended	FY26 House Recommended FTE	FY26 Senate Recommended	FY26 Senate Recommended FTE	FY26 Truly Agreed Finally Passed	FY26 Truly Agreed Finally Passed FTE	FY26 TAFP After VETO Action	FY26 TAFP After VETO Action FTE
Section 11.880														
Gr Fra-Transfer - 830257B														
Core														
General Revenue	718,701,378	0.00	718,701,378	0.00	718,701,378	0.00	718,701,378	0.00	718,701,378	0.00	718,701,378	0.00	718,701,378	0.00
Transfers	718,701,378	0.00	718,701,378	0.00	718,701,378	0.00	718,701,378	0.00	718,701,378	0.00	718,701,378	0.00	718,701,378	0.00
Total	\$718,701,378	0.00	\$718,701,378	0.00	\$718,701,378	0.00	\$718,701,378	0.00	\$718,701,378	0.00	\$718,701,378	0.00	\$718,701,378	0.00
Total - Gr Fra-Transfer	\$718,701,378	0.00	\$718,701,378	0.00	\$718,701,378	0.00	\$718,701,378	0.00	\$718,701,378	0.00	\$718,701,378	0.00	\$718,701,378	0.00

*Does not include Supplementals.

Dept Of Social Services														
	FY25 Budget Amount*	FY25 Budget FTE*	FY26 Department Request	FY26 Department Request FTE	FY26 Governor Recommended as Amended	FY26 Governor Recommended as Amended FTE	FY26 House Recommended	FY26 House Recommended FTE	FY26 Senate Recommended	FY26 Senate Recommended FTE	FY26 Truly Agreed Finally Passed	FY26 Truly Agreed Finally Passed FTE	FY26 TAFP After VETO Action	FY26 TAFP After VETO Action FTE
Section 11.885														
Fed Reimburse Allow-Transfer - 830258B														
Core														
Other Funds	718,701,378	0.00	718,701,378	0.00	718,701,378	0.00	718,701,378	0.00	718,701,378	0.00	718,701,378	0.00	718,701,378	0.00
Transfers	718,701,378	0.00	718,701,378	0.00	718,701,378	0.00	718,701,378	0.00	718,701,378	0.00	718,701,378	0.00	718,701,378	0.00
Total	\$718,701,378	0.00	\$718,701,378	0.00	\$718,701,378	0.00	\$718,701,378	0.00	\$718,701,378	0.00	\$718,701,378	0.00	\$718,701,378	0.00
Total - Fed Reimburse Allow-Transfer	\$718,701,378	0.00	\$718,701,378	0.00	\$718,701,378	0.00	\$718,701,378	0.00	\$718,701,378	0.00	\$718,701,378	0.00	\$718,701,378	0.00

*Does not include Supplementals.

DEPARTMENT OF SOCIAL SERVICES

Section 11.887 – MO HealthNet Division – FMAP Enhancement Fund Transfer

Book 8, Page 1720

Description: This section transfers moneys from the FMAP Enhancement Fund to the Budget Stabilization Fund and/or the General Revenue Fund. *(Non-count)*

Legal Base: HB 11

Funding Sources: Federal Medical Assistance Percentage (FMAP) Enhancement Fund (1181)

FY 2025 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

Core reduction: (\$50,714,412) FED TRF reduction of one-time transfer – eliminates funding for the section

GOVERNOR:

Same as Department – no additional core changes

HOUSE:

Same as Department – no additional core changes

SENATE:

Same as Department – no additional core changes

CONFERENCE:

Same as Department – no additional core changes

Dept Of Social Services														
	FY25 Budget Amount*	FY25 Budget FTE*	FY26 Department Request	FY26 Department Request FTE	FY26 Governor Recommended as Amended	FY26 Governor Recommended as Amended FTE	FY26 House Recommended	FY26 House Recommended FTE	FY26 Senate Recommended	FY26 Senate Recommended FTE	FY26 Truly Agreed Finally Passed	FY26 Truly Agreed Finally Passed FTE	FY26 TAFP After VETO Action	FY26 TAFP After VETO Action FTE
Section 11.887														
Enchanced Fmap Transfer - 830262B														
Core														
Federal Funds	50,714,412	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
Transfers	50,714,412	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00	0	0.00
Total	\$50,714,412	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00
Total - Enchanced Fmap Transfer	\$50,714,412	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00	\$0	0.00

*Does not include Supplementals.

DEPARTMENT OF SOCIAL SERVICES

Section 11.890 & 11.895 – MO HealthNet Division – Nursing Facility Federal Reimbursement Allowance (NFFRA) Transfer

Book 8, Page 1705

Description: These transfer sections allow funding to be transferred between General Revenue and the Nursing Facility Reimbursement Allowance Fund (NFFRA). *(Non-count)*

Legal Base: HB 11

Funding Sources: General Revenue (1101) and Nursing Facility Federal Reimbursement Allowance (1196)

FY 2025 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:
No core changes

GOVERNOR:
No core changes

HOUSE:
No core changes

SENATE:
No core changes

CONFERENCE:
No core changes

Dept Of Social Services														
	FY25 Budget Amount*	FY25 Budget FTE*	FY26 Department Request	FY26 Department Request FTE	FY26 Governor Recommended as Amended	FY26 Governor Recommended as Amended FTE	FY26 House Recommended	FY26 House Recommended FTE	FY26 Senate Recommended	FY26 Senate Recommended FTE	FY26 Truly Agreed Finally Passed	FY26 Truly Agreed Finally Passed FTE	FY26 TAFP After VETO Action	FY26 TAFP After VETO Action FTE
Section 11.890														
Gr Nffra-Transfer - 830259B														
Core														
General Revenue	210,950,510	0.00	210,950,510	0.00	210,950,510	0.00	210,950,510	0.00	210,950,510	0.00	210,950,510	0.00	210,950,510	0.00
Transfers	210,950,510	0.00	210,950,510	0.00	210,950,510	0.00	210,950,510	0.00	210,950,510	0.00	210,950,510	0.00	210,950,510	0.00
Total	\$210,950,510	0.00	\$210,950,510	0.00	\$210,950,510	0.00	\$210,950,510	0.00	\$210,950,510	0.00	\$210,950,510	0.00	\$210,950,510	0.00
Total - Gr Nffra-Transfer	\$210,950,510	0.00	\$210,950,510	0.00	\$210,950,510	0.00	\$210,950,510	0.00	\$210,950,510	0.00	\$210,950,510	0.00	\$210,950,510	0.00

*Does not include Supplementals.

Dept Of Social Services														
	FY25 Budget Amount*	FY25 Budget FTE*	FY26 Department Request	FY26 Department Request FTE	FY26 Governor Recommended as Amended	FY26 Governor Recommended as Amended FTE	FY26 House Recommended	FY26 House Recommended FTE	FY26 Senate Recommended	FY26 Senate Recommended FTE	FY26 Truly Agreed Finally Passed	FY26 Truly Agreed Finally Passed FTE	FY26 TAFP After VETO Action	FY26 TAFP After VETO Action FTE
Section 11.895														
Nursing Facility Reim-Transfer - 830260B														
Core														
Other Funds	210,950,510	0.00	210,950,510	0.00	210,950,510	0.00	210,950,510	0.00	210,950,510	0.00	210,950,510	0.00	210,950,510	0.00
Transfers	210,950,510	0.00	210,950,510	0.00	210,950,510	0.00	210,950,510	0.00	210,950,510	0.00	210,950,510	0.00	210,950,510	0.00
Total	\$210,950,510	0.00	\$210,950,510	0.00	\$210,950,510	0.00	\$210,950,510	0.00	\$210,950,510	0.00	\$210,950,510	0.00	\$210,950,510	0.00
Total - Nursing Facility Reim-Transfer	210,950,510	0.00	210,950,510	0.00	210,950,510	0.00	210,950,510	0.00	210,950,510	0.00	210,950,510	0.00	210,950,510	0.00

*Does not include Supplementals.

DEPARTMENT OF SOCIAL SERVICES

Section 11.900 – MO HealthNet Division – NFFRA Transfer to Quality of Care Fund

Book 8, Page 1715

Description: This section transfers moneys from the Nursing Facility Reimbursement Allowance Fund (NFFRA) to the Nursing Facility Quality of Care Fund to be used by DHSS for additional inspections and surveys and providing training and technical assistance to facilities. *(Non-count)*

Legal Base: State Statute: Section 198.418.1, RSMo.; Provisions of Chapter 198

Funding Sources: Nursing Facility Federal Reimbursement Allowance (1196)

FY 2025 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

No core changes

GOVERNOR:

No core changes

HOUSE:

No core changes

SENATE:

No core changes

CONFERENCE:

No core changes

Dept Of Social Services														
	FY25 Budget Amount*	FY25 Budget FTE*	FY26 Department Request	FY26 Department Request FTE	FY26 Governor Recommended as Amended	FY26 Governor Recommended as Amended FTE	FY26 House Recommended	FY26 House Recommended FTE	FY26 Senate Recommended	FY26 Senate Recommended FTE	FY26 Truly Agreed Finally Passed	FY26 Truly Agreed Finally Passed FTE	FY26 TAFP After VETO Action	FY26 TAFP After VETO Action FTE
Section 11.900														
Nursing Facility Qlty-Transfer - 830261B														
Core														
Other Funds	1,500,000	0.00	1,500,000	0.00	1,500,000	0.00	1,500,000	0.00	1,500,000	0.00	1,500,000	0.00	1,500,000	0.00
Transfers	1,500,000	0.00	1,500,000	0.00	1,500,000	0.00	1,500,000	0.00	1,500,000	0.00	1,500,000	0.00	1,500,000	0.00
Total	\$1,500,000	0.00	\$1,500,000	0.00	\$1,500,000	0.00	\$1,500,000	0.00	\$1,500,000	0.00	\$1,500,000	0.00	\$1,500,000	0.00
Total - Nursing Facility Qlty-Transfer	\$1,500,000	0.00	\$1,500,000	0.00	\$1,500,000	0.00	\$1,500,000	0.00	\$1,500,000	0.00	\$1,500,000	0.00	\$1,500,000	0.00

*Does not include Supplementals.

DEPARTMENT OF SOCIAL SERVICES

Section 11.905 – Department of Social Services – Legal Expense Fund

Book 8, page 1725

Description: This section provides for the transfer of General Funds to Legal Expense Fund for the payment of claims, premiums, and expenses as provided by Section 105.711 through 105.726, RSMo. In order to fund such expenses, the General Assembly also authorized three percent flexibility from various house bill sections in the department's operating budget into the \$1 transfer appropriation.

Legal Base: State Statute: Section 105.711-105.726, RSMo.

Funding Sources: General Revenue (1101)

FY 2025 GR W/H: \$0

CORE ADJUSTMENTS:

DEPARTMENT:

No core changes

GOVERNOR:

No core changes

HOUSE:

No core changes

SENATE:

No core changes

CONFERENCE:

No core changes

Dept Of Social Services														
	FY25 Budget Amount*	FY25 Budget FTE*	FY26 Department Request	FY26 Department Request FTE	FY26 Governor Recommended as Amended	FY26 Governor Recommended as Amended FTE	FY26 House Recommended	FY26 House Recommended FTE	FY26 Senate Recommended	FY26 Senate Recommended FTE	FY26 Truly Agreed Finally Passed	FY26 Truly Agreed Finally Passed FTE	FY26 TAFP After VETO Action	FY26 TAFP After VETO Action FTE
Section 11.905														
Dss Legal Expense Fund Trf - 830265B														
Core														
General Revenue	1	0.00	1	0.00	1	0.00	1	0.00	1	0.00	1	0.00	1	0.00
Transfers	1	0.00	1	0.00	1	0.00	1	0.00	1	0.00	1	0.00	1	0.00
Total	\$1	0.00	\$1	0.00	\$1	0.00	\$1	0.00	\$1	0.00	\$1	0.00	\$1	0.00
Total - Dss Legal Expense Fund Trf	\$1	0.00	\$1	0.00	\$1	0.00	\$1	0.00	\$1	0.00	\$1	0.00	\$1	0.00

*Does not include Supplementals.